Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 1 of 63

Fill in this information to identify your case:	
United States Bankruptcy Court for the: District of Nevada	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

RECEIVED AND FILED Odn

2018 FEB 28 PM 12 27

U.S. CAME THE COURT MARY A. COMOTT, CLERK

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		:
	Write the name that is on your government-issued picture	IRESI	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	FEBLES SARDINAS	· · · · · · · · · · · · · · · · · · ·
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
hcestry94	HER PROBABILIST TO THE PROPERTY OF THE PROPERTY WAS A STREET OF THE PROPERTY O	I de management and an angele	:
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
CPCMIN	inn practical to the second comprehensive and the political restriction of the second comprehensive to reduction	2000年10日 1月1日 1日 1	PPR-UPF-CAMPLAN (COMPANIE) ON TO STREET AND POST OF THE STREET AND PROPERTY OF THE STREET AND PROPERTY AND AND STREET AND
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>1 6 1 7</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

De	ebtor 1 IRESI	FEBLES SARDIN	IAS		Case number (# known)			
	First Name Middle N	Name Last Name			Dast Hallbot (4 Mount)			
gen conserve	TRAPPARALAPI CRISTANIA SI SELECTIVI ALCORRES SE SELECTIVA DE PRESENTA PRO ES GOLDES A CERTA ES SE ES ESTA ESTA	About Debtor 1:	erftimenentist ha	Periodales (Petroles de la Reion (Petroles de Constantes de la Reion (Petroles de Constantes de Constantes de C	About Debtor 2 (Spouse Only	y in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any busines	ss names o	or EINs.	☐ I have not used any busine	☐ I have not used any business names or EINs.		
	the last 8 years	Business name		9 - 100 - 10	Business name			
	doing business as names	Business name			Business name	 		
		EIN	 -		EIN			
		EIN			EIN			
5.	Where you live	pinkalaise frent der dem sembanten dem dem känden flemkattiden sembet til et det kan sembet til et de kan semb	TO THE SECOND STATE OF THE	para meneratan ing meneratan ing pamen	If Debtor 2 lives at a different	address:		
		5153 SILVERHEART AV	'F					
		Number Street		 	Number Street			
			.					
		LAS VEGAS	NV	89142				
		City	State	ZIP Code	City	State ZIP Code		
		CLARK County			County			
		If your mailing address is diff above, fill it in here. Note that any notices to you at this mailing	the court v	will send	If Debtor 2's mailing address yours, fill it in here. Note that any notices to this mailing addr	the court will send		
		Number Street		· · · · · · · · · · · · · · · · · · ·	Number Street			
		P.O. Box			P.O. Box			
		City	State	ZIP Code	City	State ZIP Code		
6.	Why you are choosing this district to file for	Check one:	mijeritani og provinskih en priparaja pri	m-Tangka aminyaka operaturan kecamatan kecamatan di	Check one:	- Calauma danny dia Calauman an can'in biolineadh na chhoire dh'i cinabh in shèil an tha bhillion (i shèinn		
	bankruptcy	Over the last 180 days before I have lived in this district for other district.	re filing this nger than i	s petition, in any	Over the last 180 days before I have Ilved in this district lo other district.			
		I have another reason. Expla (See 28 U.S.C. § 1408.)	ain.		I have another reason. Expl (See 28 U.S.C. § 1408.)	ain.		

De	btor 1 IRESI	FI	EBLES SARDII	NAS	Case number (# ka	nown)			
	First Name Middle Nam	ne	Last Name						
Pa	Tell the Court Abou	ıt Your E	ankruptcy Case						
7.	The chapter of the Bankruptcy Code you		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	Cha	pter 7						
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		☐ Cha	pter 13						
8.	How you will pay the fee	ioca your subr with I ne App I rec By la less pay	I court for more deta self, you may pay we mitting your paymen a pre-printed addre ed to pay the fee in lication for Individual juest that my fee b aw, a judge may, bu than 150% of the of the fee in installment	nils about how you mith cash, cashier's of ton your behalf, you ss. Installments. If you list to Pay The Filing waived (You may to so not required to, wificial poverty line thats). If you choose the	nay pay. Typicall theck, or money ur attorney may ur attorney may ur choose this operate in Installme request this optivalive your fee, at applies to you mis option, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check bition, sign and attach the ents (Official Form 103A). ion only if you are filing for Chapter 7. and may do so only if your income is a family size and you are unable to least fill out the Application to Have the			
9.	Have you filed for	Ø No	pter 7 ming ree vve	ived (Official Form	ioso) and the it	with your pedition.			
	bankruptcy within the last 8 years?	Yes.	District	When	MM / DD / YYYY	Case number			
			District	When	MM/ DD/ ffff	Case number			
					MM / DD / YYYY				
			District	When	MM / DD / YYYY	Case number			
10.	Are any bankruptcy	☑ No							
	cases pending or being filed by a spouse who is		Debtor			Relationship to you			
	not filing this case with you, or by a business partner, or by an affiliate?		District		MM / DD / YYYY	Case number, if known			
	annate r		Debtor			Relationship to you			
				When		Case number, if known			
					MM / DD / YYYY				
11.	Do you rent your residence?	No.	Go to line 12.	tained an eviction judg					
			☐ No. Go to line 12.☐ Yes. Fill out <i>Initia</i> part of this bankre	l Statement About an L	Eviction Judgment	Against You (Form 101A) and file it as			

ebtor 1	IRESI	FEBLES SARDI	NAS Case number (# known)				
	First Name Middle Nam	ne Last Name					
art 3:	Report About Any I	Businesses You Own as a :	Cala Brandatas				
art J.	Report About Ally I	Justinesses TOU OWN as a	sole Proprietor				
		-					
	u a sole proprietor full- or part-time	No. Go to Part 4.					
busine		☐ Yes. Name and location of	business				
	roprietorship is a						
business	you operate as an	Name of horizon in					
	al, and is not a legal entity such as	Name of business, if any					
	ation, partnership, or						
LLC.	•	Number Street					
	ve more than one						
	orietorship, use a sheet and attach it						
to this pe		City	Chat. ZID Code				
		City	State ZIP Code				
		Charletta anamari d					
			e box to describe your business:				
			ness (as defined in 11 U.S.C. § 101(27A))				
		Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
		☐ Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))				
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
		☐ None of the above	·				
		· · · · · · · · · · · · · · · · · · ·	The first state of the control of the Section of the control of th				
Bankru	r 11 of the ptcy Code and a small business	can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). 2 No. I am not filing under Chapter 11.					
	finition of small	_	·				
	s debtor, see C. § 101(51D).	the Bankruptcy Code.	oter 11, but I am NOT a small business debtor according to the definition in				
		Yes. I am filing under Chap Bankruptcy Code.	oter 11 and I am a small business debtor according to the definition in the				
art 4:	Report if You Own	or Have Any Hazardous Pr	operty or Any Property That Needs Immediate Attention				
Do you	own or have any	73					
	y that poses or is	☑ No					
alleged	to pose a threat	Yes. What is the hazard?					
	nent and						
	able hazard to nealth or safety?						
•	ou own any						
	y that needs	If immediate attentio	un in mondad, why, in it wooded?				
immedi	ate attention?	n inmediate attentio	in is needed, why is it needed?				
	nple, do you own						
that must	le goods, or livestock t be fed, or a building ds urgent repairs?						
	5 . 7	Where is the propert	ry?				
		TT. STO TO THE PROPERT	Number Street				
			City State ZIP Code				

IRES

Viiddle Name

FEBLES SARDINAS

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debi	OF '	1	:
-------	------	------	---	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	a	briefing	abou
cred	lit co	ounseling	ı be	ecause (of:	!	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ιa	am	not	requ	ai red	to	receiv	e a	briefing	about
						ecause			

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 IRESI First Name Middle Nam	FEBLES SARDIN	Case number (if kn	sown)				
Pa	rt 6: Answer These Ques	stions for Reporting Purpose	es					
16. What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
		☐ No. Go to line 16b. ☑ Yes. Go to line 17.						
			ily business debts? Business debts vestment or through the operation of the					
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.						
		16c. State the type of debts you	owe that are not consumer debts or bu	siness debts.				
	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	apter 7. Go to line 18.	errege (de direction discontinue) has enclosed an enclosed and an enclosion to the enclosed an enclosed an enclosed and an enc				
	Do you estimate that after any exempt property is	Yes. I am filing under Chapte administrative expense	er 7. Do you estimate that after any exe s are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?				
	excluded and administrative expenses	2 No						
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes						
	How many creditors do	1 -49	1,000-5,000	25,001-50,000				
	you estimate that you owe?	50-99 100-199	5,001-10,000 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000				
		200-999	10,001-20,000	Wille than 100,000				
	How much do you	2 \$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion				
	estimate your assets to be worth?	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion				
	De Worth?	\$100,001-\$500,000 \$500,001-\$1 million	□ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion				
вечанованции	MANINERS MANIES EN PROMETER DE MANIES EN PROMETER DE MANIES DE MANIES DE MANIES DE MANIES DE MANIES DE MANIES D	la di menerari in habitat mengrati dalapa dan persana manana di kelaman menerari menada menerari dan dalam dal Selaman	OR OTHER SOUTHER AND SOUTH AND	PP PARTIES OF THE MAIN AND AND AND AND AND AND AND AND AND AN				
	How much do you estimate your liabilities	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion				
	to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion				
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion				
Par	rt 7: Sign Below							
Foi	r you	I have examined this petition, an correct.	nd I declare under penalty of perjury that	t the information provided is true and				
			apter 7, I am aware that I may proceed, understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed				
			d I did not pay or agree to pay someone and read the notice required by 11 U.S.	who is not an attorney to help me fill out C. § 342(b).				
		I request relief in accordance wit	th the chapter of title 11, United States (Code, specified in this petition.				
			It in fines up to \$250,000, or imprisonm	g money or property by fraud in connection ent for up to 20 years, or both.				
		×	*					
		Signature of Debtor 1	Signatu	re of Debtor 2				
		Executed on $\frac{02 20 16}{MM/DD/Y}$) Execute	d on				

Debtor 1	IRESI	FEBLES SARDINAS	Case number (if known)	
	First Name Middle Nam			
tit on the				and the second s
	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of available under each chapter for which the pethe notice required by 11 U.S.C. § 342(b) and	itle 11, United States Code, a erson is eligible. I also certify	and have explained the relief that I have delivered to the debtor(s)
If you are not represented by an attorney, you do not		knowledge after an inquiry that the informatio	n in the schedules filed with the	ne petition is incorrect.
need to file this page.		*	Date	
		Signature of Attorney for Debtor		MM / DD /YYYY
		Printed name		
		Firm name		
		Number Street		
		City	State	ZIP Code
		Contact phone	Email addres	s
		Bar number	State	_

IRESI

FEBLES SARDINAS

Middle Name

Last Na

Case number (# known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be familiar with any state exemption laws that apply.						
Are you aware that filing for bankruptcy is a serious action consequences?	on with long-term financial and legal					
□ No ☑ Yes						
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes						
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No Yes. Name of Person AMY MILLER Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.						
Signature of Debtor 1	Signature of Debtor 2					
Date 02 20 16	Date MM / DD / YYYYY					
Contact phone	Contact phone					
Cell phone	Cell phone					
Email address	Email address					

Certificate Number: 12459-NV-CC-030575033



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>February 15, 2018</u>, at <u>10:39</u> o'clock <u>AM PST</u>, <u>Iresi Febles Sardinas</u> received from <u>Abacus Credit Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of Nevada</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 15, 2018 By: /s/Kellie Hill

Name: Kellie Hill

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Debtor 1	IRESI	FEBLES	SARDINAS
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filin	g) First Name	Middle Name	Last Name
United State	s Bankruptcy Court fo	r the: DISTRICT OF NEV	ADA

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 3. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1:

Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer	AMY MILLER	has notified me of
Name		
any maximum allowable fee before preparing	any document for filing or accepting any fee.	
Signature of Deblor 1 acknowledging receipt of this no	lice Da	ate 2 / 20 / 18 MM / DD / YYYY
Signature of Debtor 2 acknowledging receipt of this no	Da Da	ate

Under penalty of perjury, I declare that: I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer; I or my firm prepared the document slisted below and gave the debtor a copy of them and the Notice to Debtor by Bankruptcy Petition Preparer as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b), and If rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy Petition preparers and sharped the document for filing or before accepting any fee from the dobtor. AMY MILLER OWNER Printed name OWNER OWNER Printed name OWNER OW	Debtor 1	IRESI First Name Middle	FEBLES e Name Last Name	SARDINAS	_ Case numb	er (if ki	nown)
Under penalty of perjury, I declare that: I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer. I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer. I or my firm prepared the documents listed below and gave the debtor a copy of them and the Notice to Debtor by Bankruptcy Petition Preparer as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. §§ 110(h) setting a maximum fee for services that bankruptcy petition preparers any observance of the maximum amount before preparing any document for filing or before accopting any fee from the debtor. AMY MILLER OWNER Title, flary Street AMY TAXES N MORE Firm name, if it applies AMY TAXES N MORE Firm name, if it applies AMY TAXES N MORE Firm name, if it applies TOC-979-5837 Contact phone Lor my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check at that apply). A Statement About Your Social Security Numbers (Form 121) A Statement About Your Social Security Numbers (Form 121) A Statement About Your Social Security Numbers (Form 122) A Statement About Your Social Security Numbers (Form 106) A Schedule D (Form 106C) A Schedule D (Part 2:	Declaration an	d Signature of the I	Bankruptcv Peti	tion Preparer		
■ I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer: ■ I or my firm prepared the documents listed below and gave the debtor a copy of them and the <i>Notice to Debtor by Bankruptcy Petition Preparer</i> as required by 11 U.S.C. §§ 110(h), 110(h), and 342(b), and ■ If rules or guidelines are established according to 11 U.S.C. §§ 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, lor my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor. AMY MILLER OWNER AMY TAXES N MORE Firm name, if it applies ■ AMY TAXES N MORE Firm name, if it applies ■ AMY TAXES N MORE Firm name, if it applies ■ AMY TAXES N MORE Firm name, if it applies ■ Contact phone ■ Order of phone ■ Orde							· · · · · · · · · · · · · · · · · · ·
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			n preparer or officer, princi	ipal, responsible	Social Security number of p	erson	
	<u> </u>						

B2800 (Form 2800) (12/15)

Printed name and title, if any, of

Bankruptcy Petition Preparer

		United States Bankru District Of N	
In re IR	ESI FEBLES SARD	DINAS	Case No.
	Debtor		Chapter 7
[Mu.		OF COMPENSATION OF BANKR tion if a bankruptcy petition preparer	CUPTCY PETITION PREPARER prepares the petition. 11 U.S.C. § 110(h)(2).]
1.	attorney, that I prepa debtor(s) in connection the filing of the ban	ared or caused to be prepared one or on with this bankruptcy case, and that	ury that I am not an attorney or employee of an more documents for filing by the above-named compensation paid to me within one year before d to me, for services rendered on behalf of the kruptcy case is as follows:
For doc	ument preparation serv	vices I have agreed to accept	\$150.0
Prior to	the filing of this states	ment I have received	\$ <u>150.0</u>
Balance	Due		\$ <u>0.0</u>
2.	TYPED ALL CHAPTE	used to be prepared the following doc ER 7 FORMS (DECLARATION ON FO rvices (itemize): PREPARE CHAPTEI	RM 119)
•	· ·	,	n / FORMS ONL!
3.	Debtor	npensation paid to me was: Other (specify) SARDINAS paid me cash.	
4.	The source of compe Debtor	nsation to be paid to me is: Other (specify)	
5.		omplete statement of any agreement or y the debtor(s) in this bankruptcy case	r arrangement for payment to me for preparation
6.		o other person has prepared for compe except as listed below:	nsation a document for filing in connection with
NAME		SOCIAL SECURITY 1	NUMBER
	1/2	620602539	2/20/18
1	Signature	Social Security number petition preparer*	r of bankruptcy Date
AMY M	III I FR		LIITE 128 LAS VEGAS NV 89123

Address

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

^{*} If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

Fill in this i	nformation to identify	y your case:		
Debtor 1	IRESI	FEBLES SA		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing	•	Middle Name	Last Name	
	Bankruptcy Court for the:	District of Nevada		D or server
Case number	(If known)			Check if this is an amended filing
	Form 106Sun		vilities and Certain Statistical Info	2000 42/45
Be as compleinformation. your original	ete and accurate as p Fill out all of your sch	ossible. If two married p nedules first; then compl out a new <i>Summary</i> and	eople are filing together, both are equally responsible for lete the information on this form. If you are filing amende check the box at the top of this page.	r supplying correct
				Your assets
				Value of what you own
	<i>A/B: Property</i> (Official F ine 55. Total real estate	•		\$13,179.00
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1b. Copy li	ine 62, Total personal p	property, from Schedule A	/B	\$ 2,070.00
1c. Copy li	ne 63, Total of all prop	erty on Schedule A/B		\$15,249.00
Part 2: S	ummarize Your Lia	bilities		
				Your liabilities Amount you owe
		e Claims Secured by Prope Dlumn A, Amount of claim,	erty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Schedule D</i>	256 776 00
3. Schedule	E/F: Creditors Who Hav	ve Unsecured Claims (Offi	icial Form 106E/F)	0.00
3a. Copy t	he total claims from Pa	rt 1 (priority unsecured cla	aims) from line 6e of Schedule E/F	\$
3b. Copy to	he total claims from Pa	rt 2 (nonpriority unsecured	d claims) from line 6j of Schedule E/F	+ \$ 38,413.00
			Your total liabilities	\$\$95,189.00
Part 3: S	ummarize Your Inc	ome and Expenses		
	: Your Income (Official	•		s 2,362.68
	•		dule I	•
	J: Your Expenses (Office monthly expenses from the property of the property	•		. \$4,188.42

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 14 of 63

De	ebtor 1	IRESI		FEBLES SARDINAS	Case number (# known)	
		First Name	Middle Name	Last Name	, (4. value)	
Р	art 4:	Answer Th	ese Question	s for Administrative and Stati	stical Records	
6.	Are yo	ou filing for ba	ankruptcy unde	r Chapters 7, 11, or 13?		
	□ No ☑ Ye	. You have no	thing to report o	this part of the form. Check this box	and submit this form to the court with you	ur other schedules.
7.	What k	ind of debt d	o you have?			
	Yo fan	ur debts are p nily, or househ	orimarily consu old purpose." 11	mer debts. Consumer debts are thos U.S.C. § 101(8). Fill out lines 8-9g fo	se "incurred by an individual primarily for a statistical purposes. 28 U.S.C. § 159.	a personal,
			n ot primarily co ourt with your of		report on this part of the form. Check this	box and submit
8.	From t	the <i>Statemen</i> 122A-1 Line 11	t of Your Curre ; OR, Form 122	at Monthly Income : Copy your total of B Line 11; OR , Form 122C-1 Line 14	current monthly income from Official	\$2,987.20_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total . Add lines 9a through 9f.	s0.00

Fill in th	is information to identify you	ır case and thi	s filing:		
Debtor 1	IRESI	FEBLES	S SARDINAS		
Debtor 2	First Name	Middle Name	Last Name		
	filing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: Dist	trict of Nevada			
Case nurr	nber	****			Check if this is an
					amended filing
Offic	ial Form 106A/B				
Sch	edule A/B: P	ropert	у		12/15
category respons	y where you think it fits best. ible for supplying correct in ur name and case number (if	Be as comple formation. If m f known). Ansv	s. List an asset only once. If an asset fits in more ate and accurate as possible. If two married people ore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Hay	e are filing together, bo is form. On the top of a	th are equally
			st in any residence, building, land, or similar prop		
	o. Go to Part 2.	quicable intere	st in any residence, building, land, or similar prop	erty?	
2 Ye	es. Where is the property?		MR diede access de Romania		
	E1E2 OILVED HEADT /	. / E	What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
1.1.	5153 SILVER HEART A Street address, if available, or other		Duplex or multi-unit building	Creditors Who Have Clair	ns Secured by Property.
			☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			☐ Land	\$ 220,114.00	\$ <u>13,179.00</u>
	LAS VEGAS N		☐ Investment property ☐ Timeshare	Describe the nature of	of your ownership
	City Sta	te ZIP Code	Other	Interest (such as fee the entireties, or a lif	simple, tenancy by
			Who has an interest in the property? Check one.		
	CLARK		Debtor 1 only Debtor 2 only		
	County		Debtor 2 only Debtor 1 and Debtor 2 only		mmunity property
			☐ At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this it property identification number:	em, such as local	
If you	own or have more than one, lis	st here:			
			What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure	
1.2.	Street address, if available, or other	er description	Duplex or multi-unit building	Creditors Who Have Clair	
	or our data soo, it dvallable, or our	or dood profit	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			Land	s	\$
			Investment property	·	of your ownership
	City Star	te ZIP Code	☐ Timeshare ☐ Other	Interest (such as fee	simple, tenancy by
			Who has an interest in the property? Check one.	the entireties, or a life	e estate), II Known.
			Debtor 1 only		
	County		Debtor 2 only	D	
			Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
			Other information you wish to add about this ite	m, such as local	
			property identification number:		

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 16 of 63

Debtor 1		FEBLES	S SARDINAS Case number (#)	томп)	
1.3.	Street address, if available	e, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
	City	State ZIP Code	□ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co (see instructions)	mmunity property
Part 2:	Describe Your \	/ehicles			
ou own	that someone else drive , vans, trucks, tractors, lo	s. If you lease a vehicle	st in any vehicles, whether they are registered or a equipment of a secutory Contracts and a motorcycles	-	S
3.1.	Make: Model:	NISSAN ROGUE	Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on Schedule D:
	Year: Approximate mileage: Other information:	2014 32000	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this Is community property (see	Current value of the entire property? \$ 13,700.00	Current value of the portion you own? \$0.00
If you	own or have more than	one, describe here:	who has an interest in the property? Check one.	Do not deduct secured cla	
	Model: Year: Approximate mileage: Other information:		□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any secure Creditors Who Have Clain Current value of the entire property?	
	Care mornator.		☐ Check if this is community property (see instructions)	\$	\$

	First Name Middle Name	FEBLES SARDINAS Last Name Case number (#1)	unown)	
		Who has an interest in the property? Check one.	5	
	Make:	Debtor 1 only	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
ı	Model:	Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
`	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
-	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
(Other information:			
		☐ Check if this is community property (see instructions)	\$	\$
ا 4. ا	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
ı	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
		Debtor 2 only		
	Year:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
,	Approximate mileage:	At least one of the debtors and another	enure property:	portion you own?
(Other information:	<u>_</u>	•	•
		Check if this is community property (see instructions)	\$	\$
amp No	oles: Boats, trailers, motors, pe	ATVs and other recreational vehicles, other vehicles, and accessors and watercraft, fishing vessels, snowmobiles, motorcycle accessors.		
No Yes	oles: Boats, trailers, motors, pe	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		d claims on Schedule D ns Secured by Property. Current value of ti
No Yes	oles: Boats, trailers, motors, pe os Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D ns Secured by Property. Current value of ti
No Yes	oles: Boats, trailers, motors, pe os Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
No Yes	okes: Boats, trailers, motors, persons Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clain	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
No Yes	okes: Boats, trailers, motors, persons Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) At here: Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clair. Current value of the entire property? \$ Do not deduct secured clathe amount of any secure	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
No Yes	obles: Boats, trailers, motors, per obles: Boats, trailers, motors, per obles: Make: Model: Other information: own or have more than one, list Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) At here: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secure Creditors Who Have Claim Creditors Who Have Claim	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
No N	okes: Boats, trailers, motors, persons Make: Model: Year: Other information: own or have more than one, list Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) At here: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
No N	obles: Boats, trailers, motors, per obles: Boats, trailers, motors, per obles: Make: Model: Other information: own or have more than one, list Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) At here: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claim the amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secure Creditors Who Have Claim Creditors Who Have Claim	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 18 of 63

Debtor 1

IRESI

FEBLES SARDINAS

Last Name

Case number (if lenown)_____

Pa	Describe You	ur Personal and Household Items		
Do	you own or have any	legal or equitable interest in any of the following items?	portion y	uct secured claims
6.	Household goods and	furnishings		
	Examples: Major applia	nces, furniture, linens, china, kitchenware		
	□ No			
		FURNITURE AND KITCHENWARE	\$	1,000.00
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
		TELEVISION AND CELLULAR PHONE	s	300.00
	Collectibles of value	HER STATE OF THE PROPERTY OF T	ليست حب	
о.	Examples: Antiques and stamp, coin, No	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	te latinario leg	
	Yes. Describe		\$	
9.	Equipment for sports a	and hobbies		
	and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
	No Yes. Describe		\$	
10.	Firearms Examples: Pistols, rifles No Yes. Describe		\$	
11.	Clothes Examples: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories		
	No Ves. Describe	EVERYDAY CLOTHES	s	670.00
12.	Jewelry Examples: Everyday jev gold, silver ☐ No	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	Yes. Describe	EVERYDAY JEWELRY	\$	100.00
13.	Non-farm animals Examples: Dogs, cats, b			
	No Yes. Describe		\$	
14.	Any other personal and	d household items you did not already list, including any health aids you did not list		
	☑ No			
	Yes. Give specific information		\$	
15.		f all of your entries from Part 3, including any entries for pages you have attached	\$	2,070.00

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 19 of 63

IRESI

FEBLES SARDINAS

Case number (if known)_

Debtor	1

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
		Cash:	\$
17. Deposits of money Examples: Checking, s and other s	savings, or other financial accou imilar institutions. If you have m	unts; certificates of deposit; shares in credit unions, brokerage house: ultiple accounts with the same institution, list each.	S ,
☑ Yes		Institution name:	
	17.1. Checking account:	BANK OF AMERICA	\$ 0.00
	17.2. Checking account:	BANK OF AMERICA	s 0.00
	17.3. Savings account:		. \$
	17.4. Savings account:		. \$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		· \$
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		· •
	or publicly traded stocks investment accounts with broken	erage firms, money market accounts	
Yes	Institution or issuer name:		
			\$
			- \$
9. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including an interest in	
an LLC, partnership, a	Name of entity:	% of ownership:	
Yes. Give specific	rano or oney.	% of ownership.	¢

information about

them.....

%

_%

0%

0%

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 20 of 63

Case number (if known)___

FEBLES SARDINAS

20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ZÍ No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans 2 No ☐ Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others 2 No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ____ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ZÍ No ☐ Yes..... Issuer name and description:

Official Form 106A/B

IRESI

Debtor 1

Debtor 1	IHESI	FEBLES SARDINAS	Case number (# Imown)	
	First Name Middle	Name Last Name	,	
4 (m4		A !		
	s in an education ik. C. §§ 530(b)(1), 529A	A, in an account in a qualified ABLE program, o	or under a qualified state tuition program.	
No	00 (1)()/ =====	(-),(-), (-),		
		Institution name and description. Consertable Flag	Wa	
		Institution name and description. Separately file	me records of any interests.11 U.S.C. § 521(c):
				\$
				\$
				\$
5. Trusts, exercis:	equitable or future ir able for your benefit	nterests in property (other than anything listed	In line 1), and rights or powers	
Z No	able for your beliefft			
	. Give specific	proportion for the foliate fields program in the common or many many many and the control of the	etter (t. 1888). A Schille (t.	Poting
	mation about them			\$
		The state of the first participation of the first college, and described and the state of the first college of the state o	The second secon	
		arks, trade secrets, and other intellectual propermes, websites, proceeds from royalties and licens		
Z No	ss. internet domain na	imes, websites, proceeds from royalties and licens	ing agreements	
	0	<u> </u>		
	. Give specific mation about them			\$
	madon about alom			Ψ
7 licence	e franchises and o	ther general intermibles		
		ther general intangibles xclusive licenses, cooperative association holdings	liquor licenses professional licenses	
Z) No	or Danaing pormito, a	Addition noonides, esoperative association nothings	, ilquoi licerises, professionar licerises	
		CONTRACTOR OF THE STATE OF THE	e constitue a la lactica del como de la presidentida de muy constituenda de propositione de la compositione de la constituence	-~ - 1
	. Give specific mation about them			•
IIIOI	madori about diem	AND AND THE CONTROL OF THE CONTROL O		<u>\$</u>
oney or p	property owed to you	17		Current value of the portion you own?
				Do not deduct secured
				claims or exemptions.
. Tax refu	inds owed to you			
🗹 No				
☐ Yes.	Give specific informa	tion		•
	about them, including	y whether	Federal:	p
	you already filed the and the tax years		State:	\$
	and the tax years		Local:	\$
			united at a state of the grant and and and the state of the constitution and the state of the st	
. Family s				
Example	es: Past due or lump s	um alimony, spousal support, child support, mainte	enance, divorce settlement, property settleme	ent
🗹 No				
Yes.	Give specific informa	tion		
			Alimony:	\$
			Maintenance:	\$
		# 	Support	\$
			Divorce settlement:	\$
			Property settlement:	\$
	mounts someone ow es: Unpaid wages, disa Social Security ber			
🗹 No				
Yes.	Give specific informa	tion	THE RELEASE OF THE PROPERTY OF	
	•			\$

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 22 of 63

Debtor 1 IFEST FEDLES SARDINAS Case number (# known) 31. Interests in Insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value Surrender or refusion in the property and list its value Surrender or refusion in the property that is due you from someone who has died if you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information	und value:
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value Company name: Beneficiary: Surrender or refu \$	und value:
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value Company name: Beneficiary: Surrender or refusion \$	und value:
Yes. Name the insurance company of each policy and list its value Company name: Beneficiary: Surrender or refuse to each policy and list its value \$	und value:
Yes. Name the insurance company of each policy and list its value Company name: Beneficiary: Surrender or refule to refule to each policy and list its value \$	und value:
\$	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No	
go to the foreign and indicated the control of the	
Ves Give energific information	
s	
CONTROL OF COMMANDER OF THE CONTROL	
3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
ZI No	
Yes. Describe each claim	
\$	
ther contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
☑ No □ Yes. Describe each claim	
\$	
5. Any financial assets you did not already list No Section 2 No Sect	
6. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached	
for Part 4. Write that number here	0.00
Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in	Part 1.
Do you own or have any legal or equitable interest in any business-related property?	•
No. Go to Part 6.	
Yes. Go to line 38.	
Current value of	
portion you own Do not deduct secu	red claims
Do not deduct secu or exemptions.	red claims
Do not deduct secu or exemptions.	red claims
Do not deduct secu or exemptions. Accounts receivable or commissions you already earned No	red claims
Do not deduct secu or exemptions. Accounts receivable or commissions you already earned No Yes. Describe	red claims
Do not deduct secu or exemptions. Accounts receivable or commissions you already earned No Yes. Describe	red claims
Do not deduct secu or exemptions. Accounts receivable or commissions you already earned No Yes. Describe	ered claims
Do not deduct secular or exemptions. 3. Accounts receivable or commissions you already earned No Yes. Describe 9. Office equipment, furnishings, and supplies	red claims

Debtor 1	IRESI	FEBLES SARDINAS	Case number (# known)	
20010.	First Name	Middle Name Last Name	Case number (# known)	
40. Machin	ery, fixtures, e	quipment, supplies you use in business, and tools	of your trade	
☐ No				
	s. Describe		the first and the second control of the seco	;
— 103	s. Describe			\$
			THE REPORT OF THE PROPERTY AND THE PROPE	i
44				
41. Invento				
□ No	1	Memoriti menteri nemente de ministratorio protección de presenta dan que especial de como de como de como de como de especial	TOTAL TO SELECT OF A CONTROL AND A CONTROL OF A CONTROL OF A CONTROL OF A CONTROL AND	
☐ Yes	. Describe			\$
	Ę.	MANUSCHIEF OF BUILDING SERVICE CANNEY FOR COMMAND OF SERVICE AND	The control of the state of the	
40 Interest	- In nastanash	Inn on laint want.		
	is in partnersh	ips or joint ventures		
☐ No				
Yes	. Describe	Name of entity:	% of ownership:	
				_
			%	\$
			%	\$
			%	\$
43. Custom	ner lists, mailin	g lists, or other compilations		
☐ No	,	<u> </u>		
☐ Yes	Do your lists	include personally identifiable Information (as defin	ed in 11 I I S C & 101(A1A)\?	
		merado personany rasmanasio información (as demi	ed iii 11 0.0.0. g 101(41/7)):	
	□ No	processive comments of a contraction of the contrac		200
	Yes. Desc	ribe		•
				\$
	siness-related	property you did not already list		
☐ No				
	. Give specific			¢
info	rmation			\$
				\$
				\$
				Ψ
				\$
				\$
				
				\$
45 Add 464	a dailar valua a	d all of your extrict from Dart E. including any extri-	f b44bd	
		of all of your entries from Part 5, including any entrients		\$
IUI Pali	. 5. Write triat i	uniber here		
Part 6:	Describe A	ny Farm- and Commercial Fishing-Related Pro	operty You Own or Have an Interest I	n.
		have an interest in farmland, list it in Part 1.		
				
46 Do You	own or hour o	ny logal az aguitable interest in eny form, en accume	unial Sakin a related was week.	
-		ny legal or equitable interest in any farm- or comme	ercial fishing-related property?	
	Go to Part 7.			
☐ Yes	. Go to line 47.			
				Current value of the
				portion you own?
				Do not deduct secured claims
				or exemptions.
47. Farm a				
Example	es: Livestock, p	oultry, farm-raised fish		
☐ No				
Yes			THE RESIDENCE OF THE PERSONNEL OF THE WITH LITTER AND STOCKED TO THE WITH THE PERSONNEL OF THE WITH THE PERSONNEL OF THE WITH THE PERSONNEL OF THE WITH THE	normal de la companya
				\$

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 24 of 63

Debtor 1	IRESI	FEBLES SARDI	NAS		Case number (# Inown)		
	First Name	Middle Name Last Name					
0 C	-141						
o. Crops—	-either growin	ng or harvested					
	. Give specific		and the first of the second second second second	e metalicanistasianan arilaganga	the efficient of the second construction and second control of the second construction of the second c		
info	mation	And special control control and state at a control con				\$	
	nd fishing equ	uipment, implements, machinery, fixtu	res, and too	els of trade			
☐ No	***************************************	parameters are appropriate properties and a second of a contract of admitted to the contract the contract that are a contract to the contr	na i windhali (dina ji i mujiban) njigapanjigani na	the factor of the district about the west smaller	termin er er i er er simmer i minerm simmer i kværde simmer kværde simmer meddelaptiongs magagapskapterskaptaps	aru-	
West 103	***************************************	•				S	
0 Fa a	. d &ahi	Manufacture with the state of the substitute of the state	Control (CA) distribution (CA) (CA) and appropriate (CA)	THE Annal Colombia and a company of an experience of	e manasana ne nemeri nan na sasasana hinga pina makeri ne enga ama didukum rimba ne egyambanan	•	
D No	ia iistiing sap	pplies, chemicals, and feed					
		(STARGET OF MAJAROT STARGET AND TO BE THE THE THREE THE TO BE THE THREE	en de deservant masses en autorizador	MadMin Mana neodelog en encener en regges y	TREATE EST TO THE POST OF THE TREATE STATE OF THE POST	7	
		\(\text{\tinc{\text{\texit}\\ \text{\tin}\tint{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\text{\text{\text{\texi}\tint{\text{\ti}\tint{\tex{\tin\tinte\tint{\text{\tint}\tint{\tint{\tiintert{\text{\ti}\tit				\$	
1. Any farr	n- and comm	ercial fishing-related property you did			The second section of the second section of the second section of the second section s		
☐ No			_				
	Give specific					s	
		The control of the control of the control of the physician day, and the control of the control o					
		of all of your entries from Part 6, incluning the comments of				\$	
				••••••			
art 7:	Describe	All Property You Own or Have	e an Inter	est in That	You Did Not List Above		
☑ No ☐ Yes.	s: Season tickets Give specific mation		er indförstörsatör og til 2 Februari 2 den ett för	FFA-NOOP F WARM WAY A M TOURN FRANCE		\$	
inior	mation					\$_	
		The second of the second contract of the seco	manager where the extra state and a second	and a recommendation of the second se	Control of the State Control of the State of	.	
. Add the	dollar value o	of all of your entries from Part 7. Write	that numbe	er here	→	\$_	
		<u>-</u>					
a-4 C.	1 1-4 4b - T	otala af Faak Baat of this Faa					
art 8:	List the I	otals of Each Part of this For	m 				
5. Part 1; T	otal real esta	te, line 2			→	\$	13,179.00
Part 2. T	otal vehicles.	. line 5	s	0.00)		
	·	•	Ψ	2,070.00	-		
7. Part 3: T	otal personal	and household items, line 15	\$		_		
3. Part 4: T	otal financiai	assets, line 36	\$	0.00	<u>)</u> -		
9. Part 5: T	otal business	s-related property, line 45	0.00	<u>)</u>		
). Part 6: T	otal farm- and	d fishing-related property, line 52	\$	0.00)		
		operty not listed, line 54	4.0	0.00	-)		
i. F & T L / ; }	oun owier pro	operty not usted, line 54	7 \$		_ 		
2. Total pe	rsonal proper	rty. Add lines 56 through 61	\$	2,070.00	Copy personal property total	+\$	2,070.00
			Saya de Saya a Series de Cara	The state of the s	ud.		
3. Total of	all property o	n Schedule A/B. Add line 55 + line 62				s	15,249.00

				1.1				
Fi	lf in this in	forma	tion to identify your case:					
De	ebtor 1	IRES		BLES SAF	RDINAS Last Name			
	ebtor 2 pouse, if filing)	First Nar	ne Middle Name		Last Name			
			otcy Court for the: District of Ne	vada				
	se number							☐ Check if this is a
(If	known)							amended filing
<u></u>	ficial F	·	1000					
			106C		V	01-i -		ı
			·			Claim as Exe		
Be a Usin	as complete	and a	occurate as possible. If two notes are as possible at the notes are as possible.	narried people	are filing to	gether, both are equally respons VB) as your source, list the prope	ible for s	upplying correct information.
spac	ce is neede	d, fill c	out and attach to this page as	many copies	of Part 2: A	additional Page as necessary. On	the top	of any additional pages, write
-			number (if known).					•••
spe	cific dollar	amou	int as exempt. Alternatively	y, you may cl	aim the full	mount of the exemption you c fair market value of the prope	rty being	g exempted up to the amount
of a	ny applical	ole sta	atutory limit. Some exempt	ions—such a	s those for	health aids, rights to receive o	certain b	enefits, and tax-exempt
						claim an exemption of 100% or property is determined to exce		
WOU	iid be limite	ed to	the applicable statutory an	nount.				
Pa	art 1: Id	entif	y the Property You Clai	m as Exem	pt			
		,						
1.			emptions are you claiming ning state and federal nonba			your spouse is filing with you.		
			ning state and lederal nonba			U.S.C. § 522(D)(3)		
2.	For any pr	opert	y you list on <i>Schedule A/</i> B	that you clai	m as exem	pt, fill in the information below	·.	
			n of the property and line or nat lists this property	Current va		Amount of the exemption you	claim	Specific laws that allow exemption
				Copy the v		Check only one box for each exe	emption.	
	Brief description		vehicle	\$ 0.00		□s		Nev. Rev. Stat. AnnMo,
	Line from	١.	0.4			100% of fair market value,		§21.090(1)(p)
	Schedule .	A/B:	3.1			any applicable statutory lin	nit	
	Brief description		household items	\$ 1,000 .	00	□ \$		Nev. Rev. Stat. Ann.
	Line from		6	· 		100% of fair market value,		§21.090(1)(b)
	Schedule .	A/B:				any a pplicable statutory lin	H	
	Brief description	1;	electronics	\$ <u>300.00</u>)			Nev. Rev. Stat. Ann.
	Line from Schedule	A/B:	7			100% of fair market value, any applicable statutory lim	•	§21.090(1)(b)
						•		
3.			g a homestead exemption				4 4.	
	Subject to	aujus	unonium 4/0 i/ 19 and every	o years aπer t	ulat for case	s filed on or after the date of adju	ıstment.)	
		id you	acquire the property covere	d by the exem	ption within	1,215 days before you filed this	case?	
				-		, , , , , , , , , , , , , , , , , , , ,		

IRESI

FEBLES SARDINAS

Case number (if known)_

Part 2:

Additional Page

Middle Name

Brief description of the pr on Schedule A/B that lists		surrent value of the ortion you own	Amount of the exemption you claim	Specific laws that allow exemption
		copy the value from schedule A/B	Check only one box for each exemption	
Brief clothing	L \$	670.00		Nev. Rev. Stat. Ann. §21.090(1)(b)
Line from 11 Schedule A/B:			■ 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>jewelry</u>		100.00	\$\$ 100% of fair market value, up to	Nev. Rev. Stat. Ann. §21.090(1)(a)
Line from Schedule A/B: 12			any applicable statutory limit	·····
Brief single fa	amily home	13,179.00	<u>_</u> \$	Nev. Rev. Stat. Ann. §115.010, §115.020
Line from 1.1 Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		8	_ \$	
Line from			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: ————		S	D \$	
Line from Schedule A/B: ———			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	8	- s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		<u> </u>	<u>_</u> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		5		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		3	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		3	<u>_</u> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		<u> </u>	_ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:)	_ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your cas	e;			
Debtor 1 IRESI	FEBLES SARDINAS			
First Name Middle N				
Debtor 2 (Spouse, if filing) First Name Middle N				
United States Bankruptcy Court for the: District of	Nevada			
Case number				
(If known)			☐ Check i	if this is an
			amond	sa ming
Official Form 106D				
	. Who Hove Claims Secur	ad by Draw		
Schedule D. Creditors	s Who Have Claims Secur	ea by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	qually responsible fe	or supplying correc	t
additional pages, write your name and cas	the Additional Page, fill it out, number the entries, e number (If known).	and attach it to this	form. On the top of	any
1. Do any creditors have claims secured by	· · · · ·			
No. Check this box and submit this form	n to the court with your other schedules. You have noth	ing else to report on t	his form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
List All Secured Claims				
2. List all secured claims. If a creditor has m	ore than one secured claim, list the creditor separately	Column A Amount of claim	Column B Value of collateral	Column C Unsecured
	as a particular claim, list the other creditors in Part 2.	Do not deduct the	that supports this	portion
As much as possible, list the claims in aiph	abetical order according to the creditor's name.	value of collateral.	ciaim	If any
2.1 NISSAN MOTOR ACCEPTANC	Describe the property that secures the claim:	s 17,024.00	s	s
Creditor's Name		7	T	
PO BOX 660366	2014 NISSAN ROGUE			
Number Street	A state data as the state of th	_		
**************************************	As of the date you file, the claim is: Check all that apply Contingent			
DALLAS, TX 75266	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a	Const (including a right to onset)	-		
community debt Date debt was incurred	Last 4 digits of account number			
2.2	en de manuelle de la companya de la Companya de la companya de la compa	s 32,817.00	Beautiful the control of the three particular than the control of	CONTRACTOR OF THE PROPERTY OF
NISSAN MOTOR ACCEPTANC Creditor's Name	Describe the property that secures the claim:	\$ 32,817.00	\$	\$
PO BOX 660366	2017 NISSAN ROGUE (CO-SIGNER)			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
DALLAS, TX 75266	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	,			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	_		
community debt				
Date debt was incurred	Last 4 digits of account number	ninga rakin tanadiki salam katanan katan tang tang tang tang tang tang tang	igistem voim hore literature auto oranne est sustanti su transico de su companyo su su companyo su companyo su	· and an analysis of the second of the secon
Andre the challenger of comments of the	olumn A on this name Write that number have	k 49.841.00	I	

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 28 of 63

IRESI FEBLES SARDINAS Debtor 1 Case number (if known) Column A Column R Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. value of collateral. claim If any 231 RESIDENTIAL BANCORP 206.935.00 Describe the property that secures the claim: Creditor's Name 1 CORPORATE DR STE 360 SINGLE FAMILY HOME As of the date you file, the claim is: Check all that apply. LAKE ZURICH, 60047 IL Contingent Unliquidated ZIP Code State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: \$ Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: 206,935.00 If this is the last page of your form, add the dollar value totals from all pages. 256,776.00 Write that number here:

Debtor 1	IRESI	FEBLES SA	RDINAS	Case number (if known)
	First Name Middle Na			
Part 2:		e Notified for a Debt		
agency is you have	s trying to collect from more than one credito	you for a debt you owe to	someone else, list the you listed in Part 1, I	a debt that you already listed in Part 1. For example, if a collection re creditor in Part 1, and then list the collection agency here. Similarly, i list the additional creditors here. If you do not have additional persons t
				On which line in Part 1 did you enter the creditor?
Name	•			Last 4 digits of account number
Numb	er Street			_
				_
City		State	ZIP Code	_
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numb	er Street		····	_
				_
City		State	ZIP Code	
┚				On which line in Part 1 did you enter the creditor?
Name	•			Last 4 digits of account number
Numb	per Street			_
City		State	ZIP Code	- -
٦ .				On which line in Part 1 did you enter the creditor?
Name	•			Last 4 digits of account number
Numb	per Street			_
	er Jude			
City		State	ZIP Code	_
٦ .				On which line in Part 1 did you enter the creditor?
Name	<u> </u>			Last 4 digits of account number
Numb	per Street			_
				_
City		State	ZIP Code	-
				On which line in Part 1 did you enter the creditor?
Name	•			Last 4 digits of account number
Numb	per Street			_
City		State	ZIP Code	- -

۶	ill in this i	nformation to i	dentify your case:				I			
0	ebtor 1	IRESI First Name	FEBLE Middle Name	ES S	ARDINAS					
	ebtor 2	i ii at i van e	wause Name		Last Name		•			
	Spouse, if filing) First Name	Middle Name		Last Name					
1.,	Inited States	Rankruntov Court	for the: District of Nevada	19						
ľ	THIOG CIERCO	Dankiupicy Court	TO DISCHOLO NEVADO	ia					Cho.	ck if this is an
	ase number If known)			¥****						nded filing
	ii kiiowiij		· · · · · · · · · · · · · · · · · · ·			·····	J		dino	naca imig
O	fficial I	Form 106	F/F							
			 Creditors W	Vhc	Have	Unsec	ured Clair	ms		12/15
	·									
Be	as comple t the other	ete and accurat	e as possible. Use Part	t 1 for	creditors with	PRIORITY c	laims and Part 2 fo	r creditors with	NONPRIORI	TY claims.
A/E	3: Property	(Official Form	xecutory contracts or u 106A/B) and on Schede	inexp <i>lul</i> e G	red leases that: Executory Co	at could resul o <i>ntracts and</i>	it in a claim. Also Unexpired Leases	list executory co (Official Form 1	ontracts on S OGG) Do not	<i>chedule</i> include any
CLE	ditors with	n partially secu	red claims that are liste	ed in .	Schedule D: C	reditors Who	Have Claims Secu	red by Property	. If more spa	ce is
nee	eded, copy	the Part you n	eed, fill it out, number t	the e	ntries in the bo	exes on the le	oft. Attach the Con	tinuation Page t	o this page. C	On the top of
any	y additiona	ıı pages, write y	your name and case nu	ımber	(if known).					
Pa	nt 1: Li	st All of Your	PRIORITY Unsecure	od C	laims					
1.			iority unsecured claims	s aga	inst you?					
	•	to Part 2.								
	Yes.									
2.	List all of	your priority u	nsecured claims. If a cro	reditor	has more than	one priority u	nsecured claim, list	the creditor sepa	rately for eacl	n claim. For
	nonpriority	ı iisted, identiiy t zamounts. As m	what type of claim it is. If a uch as possible, list the c	a ciai daims	m nas both pho s in alphahetica	onty and nonp	nonty amounts, list	that claim here a	nd show both	priority and
	unsecured	claims, fill out t	he Continuation Page of I	Part 1	l. If more than o	one creditor ho	olds a particular clai	m, list the other o	reditors in Pa	rt 3.
			h type of claim, see the ir							
							,	Total claim	Priority	Nonpriority
	1								amount	amount
2.1	İ			_					_	_
	Priority Cred	ditor's Name		Las	st 4 digits of ac	count number	· 	\$	_ \$	_ \$
				Wh	en was the deb	t incurred?				
	Number	Street								
				As	of the date you	ı file, the claim	is: Check all that app	oly.		
	City		State ZiP Code		Contingent					
	-				Unliquidated					
	-	urred the debt? (Check one.		Disputed					
	Debto	•		-	ranioniz					
		r 2 only r 1 and Debtor 2 o	nh		pe of PRIORIT		claim:			
		st one of the debto				•				
	_		for a community debt			•	ou owe the governmen	t		
			•		Claims for death intoxicated	or personal inju	ry while you were			
	is the cia □ No	im subject to of	tset?							
	Yes									
2.2	y sud new restaurance consider	en) dentatut lehtistättesses Sarteria, van tile Pau vil sagraalinssoher en sigasjag.	en and a state of the second section of the second second second second second second second second second sec				no instrumentalistica estado in a internativada internativada estado estado estado estado estado estado estado			
	Priority Cred	litor's Name		Las	st 4 digits of ac	count number		\$	\$	_ \$
				Wh	en was the deb	t incurred?				
	Number	Street		_						
					=	file, the claim	is: Check all that app	oly.		
					Contingent					
	City		State ZIP Code		Unliquidated					
	_	rred the debt?	Check one.		Disputed					
	Debtor	•		Ty	pe of PRIORIT	Y unsecured	claim:			
	Debtor	-	nh		Domestic suppor					
		r 1 and Debtor 2 or st one of the debtor				-	ou owe the governmen	t		
							ry while you were			
			for a community debt		intoxicated		•			
		im subject to of	fset?		Other. Specify _					
	□ No									
	Yes									

Official Form 106E/F

IRESI

FEBLES SARDINAS

Last Nam

Case number (if known)_

listing any entries on this page, number them	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	Wilell Mas the Cept (It direct)			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
ity State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
the claim subject to offset?	Other. Specify			
No Yes				
er 1903/1946 ist er vil 1948 begreptt frit i Davidskillig och in geneur kontribit i Ein et 2 gelader dam under 1909 bilde.	Last 4 digits of account number	S	erationalesconicos processoros esconocicos	**************************************
riority Creditor's Name	Last 4 digits of account number			
hugh a Maria	When was the debt incurred?			
lumber Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
is the claim subject to offset?				
⊒ No				
Tyes Consequences and the second consequences and the second consequences and the second consequences and the second		医面神经炎 计时间 化超级线 计自己处理 化离光 电水平波电影 电电影	5/3000年中央1023年至1022年大大学: F2840至100	E-2000C200F CENTRAL OE INTERESTORIA
riority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
HORRY CIRCUIO S NAME	When was the debt incurred?			
lumber Street	Attien Mas the dept incurred t			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
•	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	ni fizi kojuminini filozopovila espektroniki	eri i alaus momentes establicados, establicados	tinga ing grapje tuandayan gitan anggay
- -	Other. Specify			
s the ciaim subject to offset?				
□ No				

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 32 of 63

FEBLES SARDINAS IRESI Debtor 1 Case number (if imown) List Ali of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? oxedge No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim **BANK OF AMERICA** Last 4 digits of account number 2,000.00 Nonpriority Creditor's Name 04/11/2012 When was the debt incurred? PO BOX 982238 Number Street EL PASO, TX 79998 ZIP Code As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts 🔽 No other. Specify CREDIT CARD ☐ Yes 1,383.00 **HUNTER & WARFIELD** Last 4 digits of account number When was the debt incurred? Nonpriority Creditor's Name 4620 WOODLAND CORPORATE BLVD Street TAMPA, FL 33614 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other Specify APARTMENT ✓ No Yes CAPITAL ONE BANK USA NA Last 4 digits of account number 8,921.00 Nonpriority Creditor's Name 08/19/2012 When was the debt incurred? PO BOX 30281 Number Street SALT LAKE CITY, UT 84130 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. ■ Unliquidated Debtor 1 only □ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

✓ Other. Specify <u>CREDIT CARD</u>

☑ No

Yes

☐ Check if this claim is for a community debt

Is the claim subject to offset?

IRESI

FEBLES SARDINAS

Case number (# known)_____

Part	2.

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them be	ginning with 4.4, followed by 4.5, and so forth.	Total claim
4.4 CITICARDS CBNA	Last 4 digits of account number	s 4,982.00
Nonpriority Creditor's Name PO BOX 6190	When was the debt incurred? 07/29/2017	4
Number Street SIOUX FALLS, SD 57117	As of the date you file, the claim is: Check all that apply.	
	Code	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Is the claim subject to offset?	□ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CREDIT CARD	
No Yes	Other. Specify Children Child	
SYNCB/MEGA GROUP USA INC	Last 4 digits of account number	\$ <u>1,977.00</u>
Nonpriority Creditor's Name PO BOX 965036	When was the debt incurred? 07/30/2017	
Number Street ORLANDO, FL 32896	As of the date you file, the claim is: Check all that apply.	
	Code Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
_	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset? ✓ No	Other Specify CHARGE ACCOUNT	
☐ Yes	мы дажунга амжим темперия жарай андын анын анын анын анын анын анын аны	s 3,169.00
SYNCB/SAMS	Last 4 digits of account number	\$ 0,100.00
Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred? 06/01/2012	
Number Street ORLANDO, FL 32896	As of the date you file, the claim is: Check all that apply.	
	Code Contingent Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	<u>_</u> '	
At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify CHARGE ACCOUNT	
☑ No ☐ Yes		

Debtor 1

IRESI

FEBLES SARDINAS

Case number (if known)_

Part	2.

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
SYNCB/SAMS	Last 4 digits of account number	s 6,506.00
Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred? 06/23/2013	\$_0,000.00
Number Street ORLANDO, FL 32896	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
is the cialm subject to offset?	Other. Specify CREDIT CARD	
Yes		
.8 THE HOME DEPOT	Last 4 digits of account number	\$ 2,870.0
Nonpriority Creditor's Name	When was the debt incurred? 07/28/2017	
PO BOX 6497	When was the debt incurred? <u>U//28/2017</u>	
Number Street SIOUX FALLS, SD 57117	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other, Specify CHARGE ACCOUNT	
₩ No		
9	了中部之间 在自己的知识,从它的时候,从它的时候在,这么可以明显的目的不可以说的,可能是不是一个人的人,但是是一个人的人们的人们的人们的人们的人们的人们的人们的	s 350.00
VICTORIA'S SECRET	Last 4 digits of account number	Ψ
Nonpriority Creditor's Name PO BOX 659728	When was the debt incurred? 02/16/2018	
Number Street SAN ANTONIO, TX 78265	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who Incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	- Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CHARGE ACCOUNT	
✓ No □ Yes		

IRESI

FEBLES SARDINAS

Middle Name

Case number (if known)

Afte:	r listing any entries on this page, number the	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
1.10	IMPERIAL FURNITURE		Last 4 digits of account number	_{\$} 2,118.00
	Nonpriority Creditor's Name 3680 S MARYLAND PKWY STE 181		When was the debt incurred? 12/28/2017	
	Number Street LAS VEGAS, NV 89169		As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	✓ Debtor 1 only ✓ Debtor 2 only ✓ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anotherCheck if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce the you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt 	
	ls the claim subject to offset? ☑ No ☐ Yes		Other. Specify CHARGE ACCOUNT	
4.11	ADVANCE AMERICA Nonpriority Creditor's Name	activan herris menau Adologie in consistan dinas ess è emiliarios higris no	Last 4 digits of account number	<u>\$ 1,127.0</u>
	560 N NELLIS STE E-5	,	When was the debt incurred? 01/12/2018	
	Number Street LAS VEGAS, NV 89110		As of the date you file, the claim is: Check all that apply.	
	City State Who Incurred the debt? Check one. Debtor 1 only	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce the	at
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt	ts
	Is the claim subject to offset? No Yes		Other. Specify LOAN	
11	OPPORTUNITY FINANCIAL, LLC	illence i v stellparkstickelder som enter freueringsprongsprongskelderskelte	Last 4 digits of account number	ş_3,010.00
	Nonpriority Creditor's Name		When was the debt incurred? 01/03/2018	

CHICAGO, IL 60601 State ZIP Code Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

✓ No

Yes

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

Obligations arising out of a separation agreement or divorce that

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify LOAN

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 36 of 63

Debtor 1

IRESI

FEBLES SARDINAS

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

SOUTHERN COVE APARTMENTS				On which entry in Part 1 or Part 2 dld you list the original creditor?		
	VIKING RD			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims		
				I and d divide a Face and a company		
	EGAS, NV 89119			Last 4 digits of account number		
City		State	ZIP Code			
Name				On which entry in Part 1 or Part 2 did you list the original creditor?		
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
lumber	Street			Part 2: Creditors with Nonpriority Unsecured		
				Claims		
City		State	ZIP Code	Last 4 digits of account number		
independant mentender in de	and the residence - see the residence - see the residence of the residence	ricality of when it is a little of the contractor of the wast was	The state of the s	On which entry in Part 1 or Part 2 did you list the original creditor?		
ame				Line of (Check and) [7] Both to Condition with Bright Line and Claims		
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
				Claims		
ity		State	ZIP Code	Last 4 digits of account number		
		0.0.0	2.1 5035	On which entry in Part 1 or Part 2 did you list the original creditor?		
lame						
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
4111061	Ou bo t			Part 2: Creditors with Nonpriority Unsecured Claims		
City		State	ZIP Code	Last 4 digits of account number		
Name	· ·			On which entry in Part 1 or Part 2 did you list the original creditor?		
ame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
lumber	Street			□ Part 2: Creditors with Nonpriority Unsecured		
			····	Claims		
		···		Last 4 digits of account number		
City	चित्रकेरण की ग्राहर प्रकार व्यक्त का स्वाहर अने स्वाहर का स्वाहर का स्वाहर की स्वाहर का स्वाहर की स्वाहर की स् 	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?		
lame	· · · · · · · · · · · · · · · · · · ·					
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
				Claims		
ity		State	ZIP Code	Last 4 digits of account number		
lame				On which entry in Part 1 or Part 2 did you list the original creditor?		
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number	Street			Part 2: Creditors with Nonpriority Unsecured		
				Claims		
ity		State	ZIP Code	Last 4 digits of account number		

Debtor 1

IRESI

FEBLES SARDINAS

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Total. Add lines 6a through 6d.	6 e .	\$	0.00
			Total claim	
Total claims	6f. Student loans	6 f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6 h.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6 i.	+ \$	38,413.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	38,413.00

Fill in ti	nis information to ide	ntify your case:			
Debtor	IRESI First Name		SARDINAS		
Debtor 2		Middle Name	Last Name		
	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for	the: District of Nevada			
Case nur (If known)					Check if this is an amended filing
Offici	-l Farma 1000	•			
	al Form 1060				
Sche	edule G: Ex	ecutory Con	itracts and	Unexpired Leases	12/15
1. Do y 2. List: exar	rou have any executo No. Check this box and Yes. Fill in all of the info	ormation below even if the	d leases? It with your other sched contracts or leases are myou have the contracts.	lules. You have nothing else to report on this form a listed on Schedule A/B: Property (Official Form a listed on lease. Then state what each contract or in in the instruction booklet for more examples of e	l06A/B).
		whom you have the cont	tract or lease	State what the contract or lease is for	
2.1					
Nam	e			-	
	_				
Num	ber Street				
City	The state of the s	State ZIP Code		-	
2.2					
Nam	0				
Num	ber Street			-	
City		State ZIP Code			
Nam	е .			-	
Num	ber Street				
City		State 7ID Code		-	
2.4		State ZIP Code		and the second of the second o	na ingga panggangan na mga panggangan na panggangan na panggangan na panggangan na panggangan na panggangan na
Nam					
Num	ber Street	-		-	
City 2.5		State ZIP Code		- 	
Nam	8			-	
Num					
City		State ZIP Code			
Unity					

5 111.1						
- 1111	n this ii	nformation to ider	itify your case:			
Debte	or 1	IRESI First Name	FEBLES S Middle Name	ARDINAS Last Name		
Debto			indus india	Last Ivalie,		
(Spou	se, if filing) First Name	Middle Name	Last Name		
Unite	d States	Bankruptcy Court for	the: District of Nevada			
Case (If kno	number					
(II KIK						if this is ar led filing
0.55					arrienc	æu ming
Offic	cial	Form 106H	_			
Scl	hed	ule H: Yo	ur Codebtors	.		12/15
are fill and no case r	ing tog umber number o you h No 2 Yes Vithin the vrizona, Ves. 2 No. C	ether, both are equitive entries in the late (if known). Answer any codebtor the last 8 years, ha California, Idaho, L. Go to line 3. Did your spouse, folloges. In which committees.	ually responsible for suppoxes on the left. Attach the every question. s? (If you are filing a joint covery you lived in a communouisiana, Nevada, New Meormer spouse, or legal equivages.)	elying correct information Additional Page to the Additional Page to the ase, do not list either spositive property state or termination, Puerto Rico, Texas, valent live with you at the	rritory? (Community property states and territories includes, Washington, and Wisconsin.)	e, fill it out, ur name an
	-					
	•	City	State	ZIP Code	9	
s S S	hown i Schedul Schedul	n line 2 again as a e D (Official Form	codebtor only if that pers	on is a guarantor or co	debtor if your spouse is filing with you. List the perso osigner. Make sure you have listed the creditor on Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe	
					Check all schedules that apply:	
3.1	חבו ו	DI CAL DEBON			A A	
التا	Name	SICALDERON			Schedule D, line 2.2	
		SILVERHEAR	T AVE		Schedule E/F, line	
	Number	Street VEGAS	NV	89142	Schedule G, line	
	City		State	ZiP Coo		
3.2					Schedule D, line	
	Name			,	Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
	Cib		Charles	7in Co.		
3.3	City		State	ZiP Cox	AUG.	
لٽٽا	Name				Schedule D, line	
					☐ Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
	City		State	ZIP Coo	ode	

Fill in this in	nformation to identify	your case:				
Debtor 1	IRESI	FEBLES SAI				
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	,	Middle Name	Last Name			
	Bankruptcy Court for the:	DISTRICT OF NEVADA				
Case number (If known)					1 =:	if this is:
						amended filing upplement showing postpetition chapter 13
						ome as of the following date:
Official Fo		-			MM	/ DD / YYYY
Sched	lule I: You	ır Income				12/15
you are sep eparate shee	arated and your spot	use is not filing with you, top of any additional pa	do not include in	forma	tion about vour s	th you, include information about your spouse spouse. If more space is needed, attach a if known). Answer every question.
. Fill In you informatio	r employment on.		Debtor 1			Debtor 2 or non-filing spouse
attach a se	e more than one job, eparate page with n about additional	Employment status	☑ Employed	⁄ed		☐ Employed ☐ Not employed
Include par self-emplo	rt-time, seasonal, or					
Occupation	n may include student aker, if it applies.	Occupation	HOUSEKEE	PER		
		Employer's name	BALLY'S			
		Employer's address	ONE HARRA Number Street	AH'S	COURT	Number Street
			LAS VEGAS	Stat	NV 89119	City State ZIP Code
		How long employed the			e zii dode	— State Zii Gode
Part 2:	Give Details About	Monthly Income				
spouse uni	less you are separated our non-filing spouse ha	•	er, combine the info			, write \$0 in the space. Include your non-filing
					For Debtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions (b calculate what the monthly		2.	\$_2,987.20	\$
3. Estimate	and list monthly over	rtime pay.		3.	+\$0.00	+ \$
4. Calculate	gross income. Add li	ne 2 + line 3.		4.	\$_2,987.20	\$

Official Form 106I

FEBLES SARDINAS

Debtor 1	IRESI FEBLES SARDINAS First Name Middle Name Last Name		С	ase number (if known)			
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	<u>. </u>		
Сор	y line 4 here	→ 4.	\$_	2,987.20	\$			
5. List	all payroll deductions:							
5a.	Tax, Medicare, and Social Security deductions	5a.	\$	575.02	\$			
	Mandatory contributions for retirement plans	5b.	\$_ \$	0.00	\$			
5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$			
5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$			
5e.	Insurance	5e.	\$	0.00	\$			
5f.	Domestic support obligations	5f.	\$	0.00	\$			
	Union dues	5g.	\$	49.50	\$			
_	Other deductions. Specify:	5g. 5h.	+\$	0.00				
			T \$_		+ \$	_		
6. Ad	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$_	624.52	\$			
7. Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,362.68	\$	_		
8. List	all other Income regularly received:							
8a.	Net income from rental property and from operating a business, profession, or farm							
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$			
8b.	Interest and dividends	8b.	\$	0.00	\$			
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	ent						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	_		
8d.	Unemployment compensation	8d.	\$_	0.00	\$			
8e.	Social Security	8e.	\$	0.00	\$			
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$_	0.00	\$			
	Pension or retirement income	0-		0.00	_			
•		8g.	. \$_	0.00	\$	_		
8h.	Other monthly income. Specify:	8h.	<u>+\$_</u>	0.00	<u>+s</u>			
9. Ad d	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$	<u> </u>		
	ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,362.68	\$	_]=	s	2,362.68
Inclu	e all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, you do or relatives.			ents, your roomr	nates, and other			
	not include any amounts already included in lines 2-10 or amounts that are		ailabl	e to pay expense		J. 11. +	e	0.00
	oify:		·		-	· · · •		
	the amount in the last column of line 10 to the amount in line 11. The at that amount on the Summary of Your Assets and Liabilities and Certain S				•	12.	\$Com	2,362.68 blned thly income
	you expect an increase or decrease within the year after you file this to	form?					1110111	nay income
	Yes. Explain:					•		
				····				

IRESI

Fill in this information to identify your case:				
	BLES SARDINAS			
First Name Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	An amended f	-	
United States Bankruptcy Court for the: District of Nev	/ada	A supplement expenses as of		petition chapter 13 g date:
Case number (If known)		MM / DD / YYYY	,	
Official Form 106J		J		
Schedule J: Your Exp	enses			12/15
Be as complete and accurate as possible. If two information. If more space is needed, attach and (if known). Answer every question.	married people are filing together, other sheet to this form. On the top	, both are equally respons of any additional pages, v	ible for supply vrite your nam	ing correct e and case number
Part 1: Describe Your Household				
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a separate hous	sehold?			
□ No□ Yes. Debtor 2 must file Official Form	ո 106J-2, Expenses for Separate Hou	sehold of Debtor 2.		
	out this information for Debtor 1 or	s relationship to Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. each de Do not state the dependents' names.	DAUGH	TER	20	□ No ☑ Yes
nanes.	SON		19	□ No ☑ Yes
	FIANCE		60	D No Ø Yes
				□ No □ Yes
				□ No
				☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				
Part 2: Estimate Your Ongoing Monthly	Expenses			
Estimate your expenses as of your bankruptcy fexpenses as of a date after the bankruptcy is file		• • •	•	•
applicable date.	••	,		
Include expenses paid for with non-cash govern	• -		V	
such assistance and have included it on Schedu		•	Your expe	nses
 The rental or home ownership expenses for y any rent for the ground or lot. 	your residence. Include first mortgag	ge payments and 4.	\$	1,316.24
If not included in line 4:			_	0.00
4a. Real estate taxes		4a .	\$	0.00
4b. Property, homeowner's, or renter's insuran		4b.	\$	
4c. Home maintenance, repair, and upkeep ex	•	4c.	\$	· · · · · · · · · · · · · · · · · · ·
 Homeowner's association or condominium 	dues	4d.	\$	0.00

Debtor 1

IRESI

FEBLES SARDINAS

Last Name

Case number (# known)_

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6,				
U.	6a. Electricity, heat, natural gas	6a.	\$	180.00
	6b. Water, sewer, garbage collection	6b.	\$ \$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	-
	6d. Other. Specify:	6d.	\$	
7.		7.	\$	780.00
8.	Childcare and children's education costs	8.	\$	
9.	Clothing, laundry, and dry cleaning	ъ. 9.	\$ \$	
10.	Personal care products and services			
11.	Medical and dental expenses	10. 11.	\$ \$	
12.		11.	a	0.00
12.	Do not include car payments.	12.	\$	180.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	170.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
10.	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	536.00
	17b. Car payments for Vehicle 2	17b.	\$	490.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from			
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	2 0 d.	\$	
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 44 of 63

Debtor	1 IRESI First Name	Middle Name	FEBLES SARDINAS Last Name	Case number (# known	7)		
21. Ot	her. Specify:				21.	+\$	0.00
22. Ca	iculate your mon	thly expenses.					electricité des Voltas de Collecte e Marian, est à removale de manural de la collecte de la coll
228	a. Add lines 4 throu	ugh 21.			22a.	\$	4,188.42
221	o. Copy line 22 (mo	onthly expenses	for Debtor 2), if any, from Official For	m 106J-2	22b.	\$	0.00
220	c. Add line 22a and	22b. The resul	t is your monthly expenses.		22c.	\$	4,188.42
23. Cal o	culate your mont	nly net income.					
23a.	Copy line 12 (yo	our combined m	onthly income) from Schedule I.		23a.	\$	2,362.68
23b.	Copy your mont	hly expenses fro	om line 22c above.		23b.	-\$	4,188.42
23c.	Subtract your m The result is you		s from your monthly income. acome.		23c.	\$	-1,825.74
24. Do <u>y</u>	you expect an inc	rease or decre	ase in your expenses within the yea	ar after you file this form?			
	-		paying for your car loan within the year rease because of a modification to the	, , ,			
2		ere:					

nformation to ide	ntify your case:			
IRESI	FEBLES	SARDINAS		
First Name	Middle Name	Last Name		
) First Name	Middle Name	Last Name	 -	
Bankruptcy Court fo	or the: DISTRICT OF NEVAL	DA		
				
				Check if this is an amended filing
aration ried people are f file this form wh money or prope	About an I	qually responsible for sy schedules or ame with a bankruptcy c	r supplying correct information.	nt, concealing property, or
	3,,,,	′1.		
Sign Below	· · · · · · · · · · · · · · · · · · ·		o you fill out bankruptcy forms?	
u pay or agree to	p pay someone who is NO			tice Declaration and
u pay or agree to	· · · · · · · · · · · · · · · · · · ·		o you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's No Signature (Official Form 119).	tice, Declaration, and
	First Name First Name Bankruptcy Court for 10 aration ried people are file this form who money or proper	First Name Middle Name Bankruptcy Court for the: DISTRICT OF NEVAL Form 106Dec aration About an I ried people are filling together, both are ecfile this form whenever you file bankruptcy money or property by fraud in connection	First Name Middle Name Last Name Last Name Bankruptcy Court for the: DISTRICT OF NEVADA Form 106Dec aration About an Individual ried people are filling together, both are equally responsible for file this form whenever you file bankruptcy schedules or amen money or property by fraud in connection with a bankruptcy of the state of the	First Name Middle Name Last Name Bankruptcy Court for the: DISTRICT OF NEVADA Form 106Dec aration About an Individual Debtor's Schedule ried people are filling together, both are equally responsible for supplying correct information. file this form whenever you file bankruptcy schedules or amended schedules. Making a false statemer money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or

ebtor 1	IRESI		S SARDINAS Last Name			
otor 2	First Name	Middle Name	Last Name			
ouse, if filin	g) First Name	Middle Name	Last Name			
d State:	s Bankruptcy Court for t	he: DISTRICT OF NE	VADA			
numbe	er				1	Check if this is a
	· · · · · · · · · · · · · · · · · · ·					amended filing
ficial	Form 107					
		anaial Affai	iro for Individ	luale Eiline fe	or Bankrunta	N 044
aten	nent of Fin	anciai Amai	irs for individ	uais riling to	or Bankruptc	y 04/
ber (if k	nown). Answer eve					
rt 1:	Give Details Abo	ut Your Marital St	atus and Where You	Lived Before		
What is	your current marita	al status?				
☐ Mar	riod					
	married					•
	married					
	manieu					
During		ve you lived anywher	e other than where you	live now?		
During	the last 3 years, ha		_			
During ☐ No ☑ Yes	the last 3 years, have		s years. Do not include v	here you live now.		
During ☐ No ☑ Yes	the last 3 years, ha		s years. Do not include v			Dates Debtor 2 lived there
During ☐ No ☑ Yes	the last 3 years, have		years. Do not include w	where you live now.		lived there
During No 10 Yes	the last 3 years, have List all of the places	s you lived in the last 3	years. Do not include w Dates Debtor 1 lived there	here you live now.		lived there
During ☐ No ☑ Yes	the last 3 years, have	s you lived in the last 3	Dates Debtor 1 lived there	where you live now.		lived there Same as Debto
During No 10 Yes	the last 3 years, have list all of the places better 1:	s you lived in the last 3	years. Do not include w Dates Debtor 1 lived there	There you live now. Debtor 2: Same as Debtor 1		lived there
During No of Yes	the last 3 years, have better 1: 1700 E. VIKING lumber Street	s you lived in the last 3	Dates Debtor 1 lived there From 01/11/2016	There you live now. Debtor 2: Same as Debtor 1		lived there Same as Debto
During No Of Yes	the last 3 years, have list all of the places better 1:	s you lived in the last 3	Dates Debtor 1 lived there From 01/11/2016	There you live now. Debtor 2: Same as Debtor 1	State ZIP Code	lived there Same as Debto
During No Of Yes	the last 3 years, have list all of the places better 1: 1700 E. VIKING lumber Street	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street City	State ZIP Code	lived there Same as Debto From To
During No Yes	the last 3 years, have list all of the places better 1: 1700 E. VIKING lumber Street	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	lived there Same as Debtor From To
During No Yes	the last 3 years, have a last 4 years, have a last	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street City	State ZIP Code	lived there Same as Debto From To
During No So Yes	the last 3 years, have list all of the places better 1: 1700 E. VIKING lumber Street	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Iived there Same as Debtor From To Same as Debtor
During No Yes	the last 3 years, have a last 4 years, have a last	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Iived there Same as Debtor From To Same as Debtor From
During: No Self Yes De	the last 3 years, have a second of the places better 1: 1700 E. VIKING lumber Street LAS VEGAS city	RD APT 102 NV 89119 State ZIP Code	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Anner Street City Same as Debtor 1 Number Street Number Street		Same as Debtor From To Same as Debtor
During: No Self Yes De	the last 3 years, have a last 4 years, have a last	RD APT 102	Dates Debtor 1 lived there From 01/11/2016 To 07/30/2017	Andrew you live now. Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Iived there Same as Debto From To Same as Debto From
During No See Yes	the last 3 years, have last 3 years, did the last 8 years, did	RD APT 102 NV 89119 State ZIP Code	Pates Debtor 1 lived there From 01/11/2016 To 07/30/2017 From To spouse or legal equiva	chere you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street City City lent in a community pro	State ZIP Code	Same as Debto From To Same as Debto From To Community property
During: No Self Yes Def No Self Yes No Se	the last 3 years, have last 3 years, did the last 8 years, did	RD APT 102 NV 89119 State ZIP Code	Pates Debtor 1 lived there From 01/11/2016 To 07/30/2017 From To spouse or legal equiva	chere you live now. Debtor 2: Same as Debtor 1 Number Street City Number Street City City lent in a community pro	State ZIP Code	Same as Debto From To Same as Debto From To Community property

Explain the Sources of Your Income

Debtor 1	IRESI First Name		LES SARDINAS	Case nu	mber (if known)	
Fill If yo	in the total amou	unt of income you received	nt or from operating a bu d from all jobs and all busi ome that you receive toget	nesses, including part-ti	r or the two previous cale me activities. er Debtor 1.	endar years?
⊿	Yes. Fill in the d	etails.				
			Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until led for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$4,480.80	Wages, commissions, bonuses, tips Operating a business	\$
	For last calend	dar year: lecember 31, <u>2017</u>	Wages, commissions, bonuses, tips Operating a business	s 35, 846.40	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
		lar year before that: ecember 31, 2016	Wages, commissions, bonuses, tips Operating a business	s 35,846.40	Wages, commissions, bonuses, tips Operating a business	\$
gam List ☑	nbling and lottery each source and No	winnings. If you are filing		e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	
	Yes. Fill in the d	etails.	Delsor 1		Dobler 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		r 1 of current year until iled for bankruptcy:		\$s		- \$
				\$		- \$
	For last calend	dar year: December 31,2017		\$ \$		- \$ - \$
		,,,,		\$		- \$
		dar year before that:		\$		
	(January 1 to D	December 31,2016)		\$. \$ \$

ebtor 1	IRESI		FEBLES SA	RDINAS	Case	number (if known)	
	First Name	Middle Name	Last Name				
Part 3:	List Certain	n Payments	You Made Befo	re You Filed	l for Bankruptcy		
6. Are eit	her Debtor 1's	s or Debtor 2's	s debts primarily o	consumer deb	ts?		
☐ No					e bts . <i>Consumer debts</i> a household purpose."	re defined in 11 U.S.C. § 10	1(8) as
	During the 9	0 days before	you filed for bankru	iptcy, did you p	ay any creditor a total o	f \$6,425* or more?	
	☐ No. Go t	o line 7.					
	tota	il amount you բ	oaid that creditor. D	o not include p	f \$6,425* or more in one payments for domestic si ments to an attomey for	or more payments and the upport obligations, such as this bankruptcy case.	
						after the date of adjustment.	
⊠ Ye	s. Debtor 1 or	Debtor 2 or be	oth have primarily	consumer de	ebts.		
					ay any creditor a total of	f \$600 or more?	
	☑ No. Go to	o line 7.					
	cre	ditor. Do not in	clude payments for	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$	☐ Mortgage
	Creditor's	Name					☐ Car
	Number	Street					Credit card
							Loan repayment
							☐ Suppliers or vendors
	City	Stat	te ZIP Code				Other
	Creditor's	Name			\$	\$	Mortgage
							☐ Car
	Number	Street					Credit card
							Loan repayment
							Suppliers or vendors
	City	Stat	te ZIP Code				Other
	Creditor's	Name			\$	\$	☐ Mortgage
							☐ Car
	Number	Street					Credit card
							Loan repayment
							Suppliers or vendors
	City	Stat	e ZIP Code				Other

	First Name	Middle Name	Last Name	ARDINAS	_	Case number (if known)	, , , , , , , , , , , , , , , , , , , ,
Inside corpo agent	ers include your or rations of which t, including one f as child support	relatives; any go you are an offic or a business yo	eneral partners; re cer, director, pers	elatives of any on in control, o	general partners; p r owner of 20% or	partnerships of which more of their voting	who was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
	o es. List all payme	ents to an inside	er.	Dates of payment	Total amount	Amount you still owe	Reason for this payment
				paymont	\$	\$	
Ĩ	Insider's Name				<u> </u>		
Ī	Number Street						
i	City	Sta	te ZIP Code				
					\$	\$	
Ī	Insider's Name				*	· *	
Î	Number Street						
-							
į	City	Stat	te ZIP Code				
Within an instance included	n 1 year before sider? de payments on o	you filed for ba	ankruptcy, did yo	an insider. Dates of	Total amount	Amount you still	Reason for this payment
Within an ins Includ	n 1 year before sider? de payments on o	you filed for ba	ankruptcy, did yo	an insider.	Total amount pald	Amount you still owe	
Withir an Ins Includ	n 1 year before sider? de payments on o	you filed for ba	ankruptcy, did yo	an insider. Dates of	Total amount	Amount you still	Reason for this payment
Within an Ins Included No.	n 1 year before sider? de payments on d o es. List all payme	you filed for ba	ankruptcy, did yo	an insider. Dates of	Total amount pald	Amount you still owe	Reason for this payment
Withir an Installation Include	n 1 year before sider? de payments on o o es. List all payme	you filed for ba	ankruptcy, did yo	an insider. Dates of	Total amount pald	Amount you still owe	Reason for this payment
Withir an Ins	n 1 year before sider? de payments on do es. List all payme	you filed for ba	ankruptcy, did yo	an insider. Dates of	Total amount pald	Amount you still owe	• •

City

State

ZIP Code

ebtor 1	IRESI First Name Middle N		SARDINAS	Case number (if known))	
		Castriging				
art 4	ldentify Legal Ac	ctions, Repossessio	ns, and Foreclosu	res		
Witt	nin 1 year before you fi	ied for bankruptcy, we	re you a party in any	lawsuit, court action, or admir	nistrative proce	eding?
List and	all such matters, includir contract disputes.	ng personal injury cases,	, small claims actions,	divorces, collection suits, patern	nity actions, sup	port or custody modification
1						
	Yes. Fill in the details.					
		Natur	re of the case	Court or agency		Status of the case
	Case title			Court Name		Pending
				N		On appeal Concluded
	Casa sumbar			Number Street		Concluded
	Case number			City State	ZIP Code	
	Case title			Court Name		Pending
				Countries		On appeal
				Number Street		Concluded
	Case number					
				City State	ZIP Code	
– 1	es. Fill in the informatio	n delow.	Describe the prope	erty	Date	Value of the property
	Creditor's Name					\$
	Number Street		Explain what happ			
			Property was			
			Property was Property was			
	City	State ZIP Code	_ ' '	s attached, seized, or levied.		
			Describe the prope	erty	Date	Value of the property
						\$
	Creditor's Name					
	Number Street					
			Explain what happ	enea		
			_	s repossessed.		
			Property wasProperty was			
	City	State ZiP Code		s gamisned. s attached, seized, or levied.		

1	IRESI			ES SARDINAS	Case number	(if known)	
	First Name	Middle Name	Last Na	ame		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mithin :	. 00 dave befor		h	4a allal amic amidikan (a)		:4!4_4! 4 _ PF	
acconu Mimin	i 90 days beloi nts or refuse t	re you med for o make a navn	pankrupi ent beca	tcy, did any creditor, includ suse you owed a debt?	ding a bank or financial	institution, set off any an	nounts from you
ZÍ No		· ····································	2002	inco you once a door.			
	s. Fill in the det	aile					
— 163	s. i iii iii tile det	alis.					
				Describe the action the cred	litor took	Date action	Amount
Credi	ditor's Name					was taken	
Numi	nber Street						\$
City		State ZI	^o Code	Last 4 digits of account nur	mber: XXXX		
				y, was any of your property		n assignee for the benefi	it of
		pointed receiv	er, a cust	todian, or another official?	•		
Mo No							
☐ Yes	8						
_							
	Liet Cortain	Gifts and C	ontribut	ions			
Within 2 ☑ No	2 years before		oankrupto	cy, did you give any gifts w	vith a total value of more	than \$600 per person?	
Within 2	2 years before	you filed for I	oankrupto	cy, did you give any gifts w Describe the gifts	vith a total value of more	than \$600 per person? Dates you gave the gifts	Value
Within 2	2 years before s. Fill in the det	e you filed for t	oankrupto		vith a total value of more	Dates you gave	
Vithin 2 No Yes Gif	2 years before s. Fill in the det	e you filed for I	oankrupto		vith a total value of more	Dates you gave	Value \$
Vithin 2 No Yes Gif	2 years before s. Fill in the det ifts with a total v er person	e you filed for I	oankrupto		vith a total value of more	Dates you gave	\$
Nithin 2 No Yes Gif	2 years before s. Fill in the det ifts with a total v er person	e you filed for I	oankrupto		vith a total value of more	Dates you gave	
Within 2 √ No ☐ Yes Gif per	2 years before s. Fill in the det ifts with a total ver person	e you filed for I	oankrupto		vith a total value of more	Dates you gave	\$
Within 2 No Yes Gif per	2 years before s. Fill in the det ifts with a total ver person	e you filed for I	oankrupto		rith a total value of more	Dates you gave	\$
Within 2 No Yes Gif per	2 years before s. Fill in the det ifts with a total v per person son to Whom You G	e you filed for I	t.		vith a total value of more	Dates you gave	\$
Within 2 No Yes Gif per Person	2 years before s. Fill in the det ifts with a total ver person son to Whom You G	ails for each gif	t.		vith a total value of more	Dates you gave	\$
Within 2 No Yes Gif per	2 years before s. Fill in the det ifts with a total v per person son to Whom You G	ails for each gif	t.		rith a total value of more	Dates you gave	\$
Within 2 No Yes Giff per Perso Numb	2 years before s. Fill in the det ifts with a total v er person son to Whom You G	ails for each gif ralue of more tha ave the Gift State Zif	t.	Describe the gifts	rith a total value of more	Dates you gave the gifts	\$ \$
Vithin 2 No Yes Giff per Perso Numb City Pers	2 years before s. Fill in the det ifts with a total v er person son to Whom You G	ails for each gif	t.		rith a total value of more	Dates you gave the gifts	\$
Within 2 No Yes Giff per Numb	2 years before 5. Fill in the det ifts with a total v per person son to Whom You G	ails for each gif ralue of more tha ave the Gift State Zif	t.	Describe the gifts	vith a total value of more	Dates you gave the gifts	\$ \$
Within 2 No Yes Giff per Numb	2 years before 5. Fill in the det ifts with a total v per person son to Whom You G	ails for each gif ralue of more tha ave the Gift State Zif	t.	Describe the gifts	vith a total value of more	Dates you gave the gifts	\$ \$ Value
Within 2 No Yes Giff per Perso Numb	2 years before 5. Fill in the det ifts with a total v per person son to Whom You G	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	vith a total value of more	Dates you gave the gifts	\$ \$
Within 2 No Yes Giff per Perso Numb	2 years before s. Fill in the det ifts with a total v er person son to Whom You G son's relationship as with a total va person	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	rith a total value of more	Dates you gave the gifts	\$
Within 2 No Yes Giff per Perso Numb	2 years before s. Fill in the det ifts with a total v er person son to Whom You G son's relationship as with a total va person	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	rith a total value of more	Dates you gave the gifts	\$ \$ Value
Within 2 No Yes Giff per Perso Numb	2 years before s. Fill in the det ifts with a total v er person son to Whom You G son's relationship as with a total va person	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	rith a total value of more	Dates you gave the gifts	\$
Within 2 No Yes Giff per Perso Numb	2 years before s. Fill in the det ifts with a total v er person con to Whom You G son's relationship s with a total va person	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	rith a total value of more	Dates you gave the gifts	\$
Within 2 No Yes Giff per Rersc City Pers Giffs per 1	2 years before s. Fill in the det ifts with a total v er person con to Whom You G son's relationship s with a total va person	e you filed for I ails for each gif ralue of more that ave the Gift State Zii to you	t.	Describe the gifts	vith a total value of more	Dates you gave the gifts	\$

Person's relationship to you ___

Charty's Name \$			Case number (if known)	BLES SARDINAS I Name		IRESI First Name	btor 1
No	00 to any charity?	e of more than \$60	contributions with a total valu	ptcy, did you give any gifts or co	e you filed for bank	iin 2 years before	. W ithi
Gifts or contributions to charities that total more than \$600 Describe what you contributed Charity's Name Charity's Name City State ZIP Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, of disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss include the emount that insurance has paid. List pending insurance loss include the emount that insurance has paid. List pending insurance loss Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Puecon Who Was Paid Brosst POR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING S_ LAS VEGAS NV 89123	o to any onanty .	, at ill at a large and the state of the sta		,, , , g , g	•		
Gifts or contributions to charities that total more than \$600 Churity's Name Churity's Name City State ZIP Code State City State ZIP Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, of disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include any attempts, bankruptcy or preparing a bankruptcy petition? Include any attempts, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Value Include any attempts, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Date payment or transfer was made Boso S EASTERN AVE FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING S LAS VEGAS NV 89123				tribution.	ails for each gift or c		
Charity's Name Charity's Name S_ Number Street City State ZiP Code City State ZiP Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, old disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. S_ **T*:** List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Amountain Street Description and value of any property transferred Chapter Poren Who Was Paid Sess S EASTERN AVE Number Street POR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING S_ LAS VEGAS NV 89123							
Number Street No Yes. Fill in the details.	Value			Describe what you contributed			
The contract of the contract	\$			-		Charity's Name	ō
List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, obtains a control of the control of t	\$						-
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, of disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any Insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. S						vumber Street	N
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, obtidisaster, or gambling? ✓ No					ZIP Code	City State	Ĉ
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, obtidisaster, or gambling? ✓ No					n Lossos	List Cortain	rt 6:
disaster, or gambling? ✓ Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any Insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. S					II EUSSES	Lat out tall	
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred AMY MILLER Person Who Was Paid S565 S EASTERN AVE Number Street FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING S						No	2
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? nclude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred AMY MILLER Person Who Was Paid 8565 S EASTERN AVE Number Street FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING \$	Value of property lost		has paid. List pending insurance	Include the amount that insurance			
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred AMY MILLER Person Who Was Paid 8565 S EASTERN AVE Number Street FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING \$	œ						
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to any you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred AMY MILLER Person Who Was Paid B565 S EASTERN AVE Number Street FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING \$	a						
AMY MILLER Person Who Was Paid 8565 S EASTERN AVE Number Street Date payment or transfer was made FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING \$	to anyone		ion?	tcy, did you or anyone else actin or preparing a bankruptcy petitio	you filed for bankru seeking bankruptc	in 1 year before y consulted about s de any attorneys, b	Withi you o
AMY MILLER Person Who Was Paid 8565 S EASTERN AVE Number Street FOR PREPARING ALL THE FORMS FOR MY CHAPTER 7 FILING \$				D	ails.	es. Fill in the detai	Z Y
Number Street CHAPTER 7 FILING	Amount of payment	transfer was					
	\$150.00		THE FORMS FOR MY		ERN AVE		
City State ZIP Code	\$				NV 89123 State ZIP Code	LAS VEGAS	
amy@amytaxesnmore.com Email or website address							

		BLES SARDINAS	Case number (if known)		
	First Name Middle Name Las	st Name	odoo namboi (ii xiiowii)		
	manustra a summa a manustraphica, separa mengala mengala penganggan mengala penganggan a separa separa separa s	ne sji		- Marie por terrodo qual e sub perte chada del e que fueran presençante e	ran dayan dagan makan karin kalanda karinda karinda karin dagan dagan dagan karin dagan karin dagan karin kari
		Description and value of any property	rtransferred	Date peyment or transfer was made	Amount of payment
	Person Who Was Paid	_			
	, siedi viile viid jale				\$
	Number Street	-			
		-			\$
	City State ZIP Code	_			
	Siny State ZIF GOUG				
	Email or website address				
	Person Who Made the Payment, if Not You				
7. With	nin 1 year before you filed for bankrup mised to help you deal with your credi	itcy, did you or anyone else acting or	n your behalf pay or tran	sfer any property t	o anyone who
	not include any payment or transfer that		editors ?		
4	No				
_	Yes. Fill in the details.				
		Description and value of any property	transferred	Date peyment or	Amount of paymen
	Person Who Was Paid			transfer was made	
	T GOOD WITHOUT AND				•
	Number Street	and the state of t			\$
		-			\$
	City State ZIP Code	-			\$
8. Wit	nin 2 years before you filed for bankru	- ptcy, did you sell, trade, or otherwise	transfer any property to	o anyone, other tha	
tran	nin 2 years before you filed for bankru sferred in the ordinary course of your	business or financial affairs?			an property
tran Inclu Do n	nin 2 years before you filed for bankru sferred in the ordinary course of your ide both outright transfers and transfers not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting			an property
tran Inclu Do n	nin 2 years before you filed for bankru sferred in the ordinary course of your ide both outright transfers and transfers not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting			an property
Inclu Do n	nin 2 years before you filed for bankru sferred in the ordinary course of your ide both outright transfers and transfers not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting ave already listed on this statement.	of a security interest or m	ortgage on your pro	an property perty).
tran Inclu Do n	nin 2 years before you filed for bankru sferred in the ordinary course of your ide both outright transfers and transfers not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting		ortgage on your pro	an property perty).
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btor 1	IRESI		LES SARDINAS	Case number (if kn	own)	
	First Name Middle	Name Last	Name			
. Withi	in 10 years before you	u filed for bankru	ptcy, did you transfer any pro	perty to a self-settled tru	st or similar device of v	which you
			sset-protection devices.)			•
Ø N	lo					
□ Y	es. Fill in the details.					
			Description and value of the p	roperty transferred		Date transfer was made
						was made
N	lame of trust					
			-			
			-			
	of the section of the	resided thank the residence and residence or a second or an	t etti territari etti etti etti etti etti etti etti et	ements of the excellent meaning to be a considered to the excellent of the	terfore en el contrato acusa deserra secularizada consecuente en el se se se se	
art 8:	List Certain Fina	ncial Account	s, Instruments, Safe Depo	sit Boxes, and Storag	e Units	
			cy, were any financial accour	ts or instruments held in	your name, or for your	benefit,
	ed, sold, moved, or tr					
			or other financial accounts;		ares in banks, credit ur	ions,
		n tunas, cooper	atives, associations, and othe	r financial institutions.		
Ø N	· -					
LI Y	es. Fill in the details.					
			Last 4 digits of account numb		Date account was	Last balance befor
				instrument	closed, sold, moved, or transferred	closing or transfer
					or transferred	
	Name of Financial Institution	n	XXXX-	Checking		s
				Savings		▼
	Number Street					
				Money market		
				☐ Brokerage		
	City S	itate ZIP Code		Other		
,			XXXX	Checking		\$
	Name of Financial Institution	n		☐ Savings		
				Money market		
	Number Street					
				Brokerage		
				Other		
•	City S	tate ZIP Code				
. Do ye	ou now have, or did y	ou have within 1	year before you filed for bank	ruptcy, any safe deposit	box or other depositor	y for
secu	rities, cash, or other	valuables?				_
₩ N	-					
□ Y	es. Fill in the details.					
			Who else had access to it?	Describe th	e contents	Do you still
						have it?
						□ No
i	Name of Financial Institution	<u> </u>	Name			☐ Yes
			170:170			
i	Number Street		Number Street			
•			City State ZIP Code			
			y an Cour			

City

State ZiP Code

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No See Pacific In the details. Who else has or had access to it? Describe the contents Name Number Street City State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else	Do you still have it? No Yes
Name of Storage Facility Number Street Number Street City State ZIP Code	have it?
Number Street City State ZIP Code	
City State ZIP Code	
City State ZIP Code	
Part 9: Identify Property You Hold or Control for Someone Else	
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.	
Yes. Fill in the details.	Value
Owner's Name	\$
Number Street	
City State ZIP Code	
Part 10: Give Details About Environmental Information	
For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.	
 Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. 	
 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. 	
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.	
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law. No.	w?
☐ Yes. Fill in the details. Governmental unit Environmental law, if you know it D	Pate of notice
Continuental law, it you will a	ate of nonce
Name of site Governmental unit	
Number Street Number Street	
City State ZiP Code	

Debtor 1	IRESI First Name Middle Nam	FEBLES SARDINAS e Last Name	Case number (if known)	
11				
		mental unit of any release of hazardous m	aterial?	
	No			
u	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site			
		Governmental unit		
	Number Street	Number Street		
		City State ZIP Coo	ie .	
	City State	ZIP Code		
26. Hav	ve you been a party in any	judicial or administrative proceeding unde	er any environmental law? Include settlemen	ts and orders.
	No			
	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
	Case title			Cese
	Case title	Court Name		Pending
				On appeal
		Number Street		☐ Concluded
	Case number			
	Vasa number	City State Zi	IP Code	
Part 1	Give Details Abo	out Your Business or Connections to	Any Ruciness	
			or have any of the following connections to	any hyainana?
	A sole proprietor or se	elf-employed in a trade, profession, or other	er activity, either full-time or part-time	any business:
	☐ A member of a limited	liability company (LLC) or Ilmited liability	partnership (LLP)	
	A partner in a partner	ship		
		managing executive of a corporation		
	An owner of at least 5	% of the voting or equity securities of a co	rporation	
Ø	No. None of the above ap	plies. Go to Part 12.		
	Yes. Check all that apply	above and fill in the details below for each	business.	
		Describe the nature of the bus	siness Employer Identification	number
	Business Name	Wyda-16-4	Do not include Social S	ecurity number or ITIN.
			EIN:	
	Number Street	Name of accountant or bookk		
			ocpoi Dates vusiness exister	•
			From To	
	City State			
		Describe the nature of the bus		number ecurity number or ITIN.
	Business Name		DO INCIDIOS SUCIAI S	our ny namon or lint.
	N		EIN:	
	Number Street	Name of accountant or bookk	eeper Dates business existed	l
			From To	

City

ZiP Code

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 57 of 63

Describe the nature of the business Describe the nature of the business Employer Identification number Do not include Social Security number of ITIM.	otor 1	IRESI		FEBL	ES SARDINAS	Case number	(if known)	
Business Name Business Name Business Name Bin: From To Dates business existed Dates business existed From To Dates business existed From To Dates business existed From To To Date State ZIP Code From To Date State ZIP Code Date Date Date Date Date Date		First Name	Middle Name	Last N	lame		(# #//04/7)	
Business Name Business Name Business Name Bin: From To Dates business existed Dates business existed From To Dates business existed From To Dates business existed From To To Date State ZIP Code From To Date State ZIP Code Date Date Date Date Date Date								
Business Name Business Name Business Name Bin: From To Dates business existed Dates business existed From To Dates business existed From To Dates business existed From To To Date State ZIP Code From To Date State ZIP Code Date Date Date Date Date Date					Describe the mature of the business		Employer Iden	tification number
Name of accountant or bookkeeper Date business existed					Describe the nature of the busine)SS		
Name of accountant or bookkeeper Dates business existed		Business Name						
Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name Name							EIN:	
Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No No Date issued Name Number Street City State ZP Code Tt 12: Sign Below Induction of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. Junderstand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Signature of Debtor 1 Signature of Debtor 2 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Name of person AMY MILLER Attach the Bankruptcy Pelition Preparer's Notice,		Number Street			Name of a supplied to be able to		Batan baadaa	
Within 2 years before you flied for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name Number Street City State ZIP Code Name Name New / DD / YYYY State ZIP Code Name New / DD / YYYY Number street Linderstand that making a failse statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Signature of Debtor 1 Signature of Debtor 1 Date Did you statch additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes. Name of person AMY MILLER Attach the Bankruptcy Petition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,					Name of accountant or bookkeep	er	Dates busines	s existed
Within 2 years before you flied for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name Number Street City State ZIP Code Name Name New / DD / YYYY State ZIP Code Name New / DD / YYYY Number street Linderstand that making a failse statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Signature of Debtor 1 Signature of Debtor 1 Date Did you statch additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes. Name of person AMY MILLER Attach the Bankruptcy Petition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,								
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Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No	ans in c	wers are true and connection with a	i correct. bankrup	l understant tcy case can	d that making a false statement,	concealing proper	ty, or obtaining	g money or property by fraud
Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No		Signature of Debtor	1		Signature of Det	btor 2		
Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No		2120118						
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✓ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ No ☑ Yes. Name of person AMY MILLER Attach the Bankruptcy Petition Preparer's Notice,	Did	vou attach additi	onal pag	es to Your S	tatement of Financial Affairs for	· Individuals Filina f	or Bankruptev	(Official Form 107)?
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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person AMY MILLER Attach the Bankruptcy Petition Preparer's Notice,	_	No						
□ No □ Yes. Name of person AMY MILLER . Attach the Bankruptcy Petition Preparer's Notice,		Yes						
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Yes. Name of person AMY MILLER Attach the Bankruptcy Petition Preparer's Notice,			to pay s	omeone who	is not an attorney to help you f	III out bankruptcy fo	orms ?	
Yes. Name of person ANY WILLER Attach the Bankruptcy Petition Preparer's Notice,			A 2 4 1	MAIL LED				
Declaration, and Signature (Official Form 119).	14	Yes. Name of pers	on AIVI Y	MILLEK				

Fill in this in	formation to ic	lentify your case:		
Debtor 1	IRESI First Name	FEBLES	SARDINAS	
Debtor 2		widdle (vallie	Last Name	
(Spouse, if filing)		Middle Name	Last Name	
	Bankruptcy Court	for the: DISTRICT OF NEVA	ADA .	
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

an

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's name: NISSAN MOTOR ACCEPTANCE	☐ Surrender the property.	□ No
name.	Retain the property and redeem it.	⊻ Yes
Description of property securing debt: 2014 NISSAN ROGUE	Retain the property and enter into a Reaffirmation Agreement.	
,	Retain the property and [explain]: CONTINUE MAKING PAYMENTS	
Creditor's RESIDENTIAL BANCORP	☐ Surrender the property.	□ No
name.	Retain the property and redeem it.	☑ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
3	Retain the property and [explain]: CONTINUE MAKING PAYMENTS	
Creditor's name: NISSAN MOTOR ACCEPTANCE	☐ Surrender the property.	☑ No
mano.	Retain the property and redeem it.	Yes
Description of property securing debt: 2017 NISSAN ROGUE	Retain the property and enter into a Reaffirmation Agreement.	.azit1
_	Retain the property and [explain]: CO - Signer CONTINUE MAKING PAYMENTS	AAIII
Creditor's name:	☐ Surrender the property.	□ No
	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
-	Retain the property and [explain]:	

Case 18-11009-mkn Doc 1 Entered 02/28/18 12:47:53 Page 59 of 63

1	IRESI First Name	Middle Name	FEBLES SARDINAS	Case number (If known)
	Lubi (Adillo	Mode Halle	Last Name	
t 2:	List Your L	Inexpired	Personal Property Leases	
in the i	nformation be	ow. Do not	list real estate leases. Unexpired leases	executory Contracts and Unexpired Leases (Official Form 106G), sare leases that are still in effect; the lease period has not yet e does not assume it. 11 U.S.C. § 365(p)(2).
Descr	ibe your unexpi	red persona	il property leases	Will the lease be assumed?
Lessor	's name:			□ No
Descrir	otion of leased			☐ Yes
propert		f warms from your 18	g 1999 - Norman de Mariana de La Caracteria de la compansión de la compans	
Lessor	's name:			□No
Descri	otion of leased			☐ Yes
propert	ty:	mar-volvenski stronomorphism i direktoria		
Lessor	's name:			□No
Descrip	otion of leased			☐ Yes
propert				
Lessor	's name:	Budden Therman Probability (1974)	t Muhadrined. Au C Jeley Histototikourin innertellistekken kirjakuuduskisti in 1907a vari espera automok kun	□No
				☐ Yes
Descrip propert	otion of leased ty:			
Lessor	's name:	An was to the entering the grant	an en enembro como entre (1986-2007) — en 2 e abbar (n. 1-1) an el term (n. 1-1) an distribución (n. 1-1) en e	No
				☐ Yes
propert	otion of leased ty:			
Lessor	's name:		AND THE PROPERTY OF THE PROPER	□ No
Donorio	ntian of lanced			☐ Yes
propert	otion of leased ty:			
Lessor	's name:	The service of the Service on the service of the se	As a proposing of the proposition of the control of	□ No
_				☐ Yes
Descrip propert	otion of leased by:	Marketing of the same parameters of the same of		
	_			
		,		

Debtor 1	IRESI	FEBLES SARDINAS		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Case number	Bankruptcy Court fo	rthe: DISTRICT OF NEV	ADA	

	Check one box only as directed in this form and in Form 122A-1Supp:
ſ	■ 1. There is no presumption of abuse.
	2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
	3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1:	Calculate Your Current Monthly Income						
-	your marital and filing status? Check one only						
	married. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill out	both Colum	ns A and B,	lines 2-11	1.		
☐ Marr	ied and your spouse is NOT filing with you. Y	ou and you	r spouse a	re:			
	Living in the same household and are not leg	ally separat	ted. Fill out	both Colu	mns A	and B, lines	3 2 -11.
	Living separately or are legally separated. Fill under penalty of perjury that you and your spous spouse are living apart for reasons that do not in	se are legally	separated	under non	bankru	iptcy law tha	at applies or that you and your
bankrup August 3 Fill in the	te average monthly income that you received of the case. 11 U.S.C. § 101(10A). For example, if al. If the amount of your monthly income varied of executt. Do not include any income amount more from that property in one column only. If you have	you are filing luring the 6 rethan once. I	g on Septer months, add For example	nber 15, ti I the incon e, if both s	he 6-m ne for a pouses	onth period all 6 months s own the sa	would be March 1 through and divide the total by 6. ame rental property, put the
					Colum Debto		Column B Debtor 2 or non-filing spouse
Your gro	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).				\$ <u>2</u>	<u>,987.2</u> 0	\$
	r and maintenance payments. D o not include pa B is filled in.	ayments fron	n a spouse	if	\$	0.00	\$
of you of from an of and room	ints from any source which are regularly paid or your dependents, including child support. In unmarried partner, members of your household, nmates. Include regular contributions from a spor Do not include payments you listed on line 3.	nclude regula your depend	ar contributi ents, parent	ons ts,	\$	0.00	\$
or farm	me from operating a business, profession,	Debtor 1	Debtor 2				
_	ceipts (before all deductions)	\$	\$				
Ordinary	and necessary operating expenses	- \$	- \$				
Net mon	thly income from a business, profession, or farm	\$_0.00	\$	Copy here	\$	0.00	\$
	me from rental and other real property ceipts (before all deductions)	Debtor 1 \$	Debtor 2 \$				
Ordinary	and necessary operating expenses	- \$	- \$				
Net mon	thly income from rental or other real property	s 0.00	\$	Copy here	\$	0.00	\$
		Ψ	Ψ			0.00	

Debtor 1	IRESI First Name		S SARDINAS _	Case	numbei	(if known)		
	First Name	Middle Name Last Name						
					lumn A otor 1	1	Column B Debtor 2 or non-filing spouse	e e
8. Une	mployment com	pensation		\$		0.00	\$	
		unt if you contend that the am irity Act. Instead, list it here:					7	-
F	or you		\$					
F	or your spouse		······ \$					
9. Pen	sion or retirement efit under the Soci	nt income. Do not include any lal Security Act.	y amount received that was a	\$_		0.00	\$	
Do i as a	not include any be i victim of a war cr	nefits received under the Soc ime, a crime against humanity	Specify the source and amour ial Security Act or payments read, or international or domestic rate page and put the total bel	eceived				
				\$		0.00	\$	
				\$		0.00	\$	
To	tal amounts from s	separate pages, if any.		-		0.00	± c	
		roparato pagos, ir arry.		' ⊅_		0.00	т ֆ	
		current monthly income. Ad total for Column A to the total		\$ _	2 ,98	7.20 +	\$	= \$2,987.20 Total current
Part 2	Determine \	Whether the Means Test	Applies to You		·			monthly income
12. Calc	ulate your curre	nt monthly income for the y	ear. Follow these steps:				·	Distriction of Degraphs and Resident age of the control of the Con
12a.	Copy your total	current monthly income from	line 11			Сор	y line 11 here 👈	<u>\$ 2,987.20</u>
	Multiply by 12 (t	he number of months in a yea	ar).				lons (x 12
12b.	The result is you	ur annual income for this part	of the form.				12b.	\$ <u>35,840,4</u> 0
13. Calc	ulate the median	family income that applies	to you. Follow these steps:					
Filli	n the state in whic	h you live.	NEVADA					
Fill i	n the number of pe	eople in your household.	4				_	
To fi	nd a list of applica	ble median income amounts,	ize of householdgo online using the link specifable at the bankruptcy clerk's o	fied in the se			13.	<u>\$ 67,807.00</u>
14. How	do the lines con	npare?						
14a.	Line 12b is le Go to Part 3.	ss than or equal to line 13. Or	n the top of page 1, check box	1, There is i	no pre	sumption	of abuse.	
14b.	Line 12b is m Go to Part 3 a	ore than line 13. On the top o and fill out Form 122A–2.	f page 1, check box 2, The pre	esumption of	abuse	e is detern	nined by Form 122	A-2 .
Part 3:	Sign Below	,						
	By signing her	e. I declare under penalty of r	perjury that the information on	this stateme	nt and	in any att	achments is true a	nd correct
	×	·		×	in and	iii aiiy at	acimono is true a	ind correct.
	Signature of	Debtor 1		Signature	of Deb	tor 2		
	Date MM / S	VIIV		Date	/ DD	/YYYY		
	If you chec	ked line 14a, do NOT fill out o	or file Form 122A-2					
		ked line 14b, fill out Form 122						

UNITED STATES BANKRUPTCY COURT

DISTRICT OF NEVADA

)
In re:) Bankruptcy No.:
IRESI FEBLES SARDINAS) Chapter 7
) VERIFICATION OF CREDITOR
) MATRIX
)
Debtor(s).))
)
	→

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 2 20 18	Signature
Date	Signature

CREDITOR MATRIX IRESI FEBLES SARDINAS

BANK OF AMERICA PO BOX 982238 EL PASO, TX 79998

HUNTER & WARFIELD 4620 WOODLAND CORPORATE BLVD TAMPA, FL 33614

SOUTHERN COVE APARTMENTS 1700 E VIKING RD LAS VEGAS, NV 89119

CAPITAL ONE BANK USA NA PO BOX 30281 SALT LAKE CITY, UT 84130

CITICARDS CBNA PO BOX 6190 SIOUX FALLS, SD 57117

NISSAN MOTOR ACCEPTANCE PO BOX 660366 DALLAS, TX 75266

RESIDENTIAL BANCORP 1 CORPORATE DR STE 360 LAKE ZURICH, IL 60047

SYNCB/MEGA GROUP USA INC PO BOX 965036 ORLANDO, FL 32896

SYNCB/SAMS PO BOX 965005 ORLANDO, FL 32896

THE HOME DEPOT PO BOX 6497 SIOUX FALLS, SD 57117

VICTORIA'S SECRET PO BOX 659728 SAN ANTONIO, TX 78265

IMPERIAL FURNITURE 3680 S MARYLAND PKWY STE 181 LAS VEGAS, NV 89169

ADVANCE AMERICA 560 N NELLIS STE E-5 LAS VEGAS, NV 89110

OPPORTUNITY FINANCIAL, LLC 130 E RANDOLPH ST STE 3400 CHICAGO, IL 60601